

NEW NEW YORK STATE LIQUOR AUTHORITY

APPLICATION FOR ALCOHOLIC BEVERAGE RETAIL LICENSE

It is not necessary to employ any person, agency or organization to assist you in filing this application. Beware of persons claiming to be able to assist you in securing action on your application. The payment of money or other thing of value for the use of influence, or promise of influence in obtaining a license is a violation of law and offenders will be prosecuted.

1.) **APPLICANT NAME** STARGEM RESTAURANTS CORP.
TRADE NAME (D/B/A) _____
Premises Street Address 485 MADISON AVENUE 34 EAST 52nd STREET A/K/A 485 Madison Ave.
City, Town or Village NEW YORK **ZIP** _____
County NEW YORK **Tel. No.** N/A
Between what streets _____
Premises Post Office Address (if different from above) _____

2.) **LANDLORD NAME** 485 MADISON ASSOCIATES
Landlord address 110 EAST 59th STREET
City, Town or Village NEW YORK, NEW YORK **ZIP** 10022
Telephone No. _____

3.) **ATTORNEY/REPRESENTATIVE NAME** GUY T. PARISI
Office Address 112 WOODS END ROAD
City, Town or Village CHAPPAQUA, NEW YORK **ZIP** 10514
Telephone No. (914) 338-6762

4.) **Alcoholic Beverage License Class:** ON-PREMISES LIQUOR **CODE:** 2 5 2
5.) **TOTAL PAYMENT DUE** \$ 5,200.00
SEP 7 1993
6.) **PENAL BOND DUE** \$ 1,000.

LICENSING PROCESSING

Date filed: 9/2/93
County Code # **NEW**
Local Board Action:
STATE LIQUOR AUTHORITY action:
Date of ISSUANCE: 11/12/93
317623

[OFFICE USE ONLY]

9/16/93 cn

APPROVED

Members of the Authority

11/19/93
Approval
Approval
Disapproval

SERIAL NUMBER: DP-06650

APPLICATION ACCEPTED BY: J. Bowman

DATE: 9/7/93

**DATA ENTERED
DESK TRACKED**

ENTRY RECORD

047628

Zone County Serial Class Deposit Date Slip No.

252

SEP 10 1993

Fee \$

5100.00

Assessed by

M

7.) (TO BE FILLED IN ONLY BY INDIVIDUAL OR PARTNERSHIP APPLICANTS)

Name of applicant	Residence	Citizenship	DOB

8.) (TO BE FILLED IN ONLY BY CORPORATION APPLICANTS)

- (a) State under what law applicant was organized:
- (b) Date of organization:
- (c) If applicant is a foreign corporation, has a certificate of authority been obtained to do business in this state?
- (d) If YES, date of certificate:
- (e) Name of principal place of business:
- (f) Address of principal place of business:
- (g) Number of outstanding shares:
- (h) List names and addresses of the STOCKHOLDERS, all OFFICERS and DIRECTORS as of the date of filing of this application:

NEW YORK

NO ___ YES ___

Name of Stockholder/ Officer/Director	Residence	Citizenship	Title	No. of Shares	Birthdate
MARION SCOTTO	[REDACTED]	[REDACTED]	PRESIDENT	51	[REDACTED]
ELAINA SCOTTO			VICE-PRESIDENT	20	
ANTHONY SCOTTO			SEC. / TREAS.	20	
ROSANNA SCOTTO				9	

- 9.(a) Does applicant occupy said premises under a written lease or option to lease? NO ___ YES XX

- (b) If YES, state name and address of immediate lessor?

485 MADISON ASSOCIATES
110 E. 59th STREET
NEW YORK, NEW YORK 10022

- (c) Date and Duration of lease:

- (d) Do the terms of the lease or other arrangement require payment by the applicant of any consideration based on a percentage of the receipts of the business?

NO X YES ___

- (e) If YES, state percentage and give details:

GUY T. PARISI
COUNSELLOR AT LAW
112 WOODS END ROAD
CHAPPAQUA, NEW YORK 10514

(914) 238-6762
FAX (914) 238-6719

October 27, 1993

Hon. Thomas A. Duffy, Jr.
Chairman, New York State Liquor Authority
250 Broadway
New York, New York 10007

Re: Starjem Restaurant Corp.
485 Madison Avenue
New York, New York

Dear Chairman Duffy,

As the Attorney for the above referenced pending application, I am writing to advise you of a hardship situation.

The principals of the applicant corporation- which will operate as an upscale restaurant- will not open for business without a license to sell alcoholic beverages. They are currently paying rent, (\$20,000 to date), paying a staff and other expenses of an operating business, although they are not open for business. They have invested a substantial amount of money and unless they can open for business immediately they can no longer afford to carry the expenses of the business with their personal funds.

Needless to say if this application is granted the business will generate revenues for New York City and State.

Your assistance would be gratefully appreciated.

Very truly yours,

Guy T. Parisi
Guy T. Parisi

GTP:jrt

11/2/93
Hardship letter
to applicants' file

Jeff

Please process
this matter.

J. OC

10(a) Is any license under the Alcohol Beverage Control Law now in effect for the premises for which this application is filed?

NO ☒ YES ☐

(b) If YES, state name of licensee:

(c) License number:

11(a) Will any other business of any kind be carried on in said premises?

NO ☒ YES ☐

(b) If YES, provide details:

12.) Are the said premises located in a district created under any zoning laws which restricts the maintenance of a business at the premises to be licensed?

NO ☒ YES ☐

13.) Do said premises comply with all applicable building, fire and health laws, ordinances and regulations?

NO ☐ YES ☒

14(a) Are premises located within 200 feet of a building occupied exclusively as a school, church, synagogue or other place of worship, which is located on the same street or avenue?

NO ☒ YES ☐
GROCERY STORE ☐

(b) If YES, state what date said premises have been continuously licensed under the Alcoholic Beverage Control Law?

15(a) Has any person not an applicant herein, or if a corporate applicant, any person not an officer, director or stockholder of such corporation any interest, financial, proprietary or other, direct or indirect, in the premises or in the business to be licensed or has made any loan to the applicant for said business, or has any lien or mortgage on the fixtures in the business?

NO ☒ YES ☐

(b) If so, state the names and addresses of such persons, the nature of their interest and the date when it was acquired?

Name

Address

16(a) Does any person not an applicant herein, or, if a corporate applicant, any person not an officer, director or stockholder of such corporation, or any person not reported in questions above, share, or will share on a percentage basis or in any way in the receipts, losses or deficiencies of the business, to any extent whatsoever.

No ☒ Yes ☐

(b) If so, state the names and addresses of such persons, the nature and percent of their share and date acquired.

Name	Address	Stock shares	Date Acquired
------	---------	--------------	---------------

17(a) Has the applicant or (if a partnership) any of the partners or (if a corporation) any of the officers, directors or stockholders any interest, directly or indirectly, in any premises or business where any alcoholic beverage is manufactured or sold at wholesale or retail, whether by stock ownership, interlocking directors, mortgage or lien on, or ownership of any real or personal property, or by any other means including loans?

NO ☐ YES ☒

(b) If YES, state the name and addresses of the premises, the license number, the date the interest was acquired and the exact nature of the interest.

Premises Name	Premises Address	License No.	Date Acquired	Interest
---------------	------------------	-------------	---------------	----------

18(a) Has the applicant or (if partnership) any of the partners or (if a corporation) any of the officers, directors or stockholders, or any agent or employee of the applicant, ever been CONVICTED (including pleas of guilty or suspended sentences) of any felony or of any other crime or offense of any kind except traffic infractions?

NO ☐ YES ☐

(b) If YES, state date of conviction, crime or offense involved and name of person convicted. In each case a CERTIFICATE OF DISPOSITION or a CERTIFICATE OF CONVICTION by the Court Clerk must be attached.

Crime or offense	Date	Name of person convicted
------------------	------	--------------------------

19(a) Are there any ARRESTS, INDICTMENTS or SUMMONS (except for traffic infractions) PENDING against the applicant or (if a partnership) any of the partners or (if a corporation) any of the officers, directors or stockholders, or any agent or employee of the applicant?

NO X YES

(b) If YES, state date thereof, crime or offense involved and the name of each defendant.

Crime or offense

Date

Name of person convicted

20(a) Federal Taxpayer Identification No.:

PENDING

(b) If you did not provide your Tax Number, indicate the reason:

Number applied for
and pending X
Number not required,
exempt organization

21.) Certificate of Authority to Collect Sales Taxes Number:

PENDING

22(a) Are you an employer with one or more employees?

NO YES X

If YES, complete the following:

(b) Worker's Compensation Policy Number:

PENDING

(c) Company:

(d) Effective Date:

(e) Disability Benefits Number:

PENDING

(f) Company:

(g) Effective Date:

APPLICANTS MUST SUBMIT THE FOLLOWING DOCUMENTS WITH THIS APPLICATION

See INSTRUCTIONS for complete explanations.

23.) Financial Documents.

24.) Fingerprint Cards.

25.) Contracts.

26.) Photographs.

27.) Diagrams.

LIST OF EXPENSES FOR THIS VENTURE

All applicants, EXCEPT for Grocery Store and Drug Store Beer, must complete Section B.

Expense Item

1.	Real Property	0
2.	Fixtures & Equipment	100,000.
3.	Inventory	50,000.
4.	Security Deposit	20,000.
5.	Attorney/Representative Fees	3,500.
6.	Operating Capital	100,000.
7.	Miscellaneous Expenses	50,000.
8.	SLA Fees	5,200.
9.	Rent Paid to Date	0
10.	Renovations	100,000.
11.	Goodwill	0
12.	Other	

13. Total Cash \$ 428,700.00

14. Total Deferred \$ 0

Explain how deferred:

15. Total Cost \$ 428,700.00

SECTION C

NOTIFICATION RIDER TO APPLICATION

All applicants, EXCEPT Grocery and Drug store Beer, must complete Section C.

NOTICE

You are required by the Alcoholic Beverage Control Law, Section 64, Subdivision 2a, upon receipt of an application for a license to sell liquor at retail for consumption on the premises, to promptly notify the Clerk of Village, Town or City (or Community Board in New York City) which has jurisdiction over the area where the premises are located. This notification is to be sent by certified mail, return receipt requested.

If you are unsure of which community board serves the area in which your premises are located, call the number listed below for the office of your Borough President:

Manhattan
212-669-8300

Bronx
718-590-3500

Queens
718-520-3200

Staten Island
718-390-5102

Brooklyn
718-802-3700

CERTIFICATION RIDER TO APPLICATIONS

I hereby certify that I have complied with the requirements of Section 64, Subdivision 2a of the Alcoholic Beverage Control Law, and have sent notification of my application to become licensed, by certified mail, return receipt requested to the Clerk of Village, Town, Village (circle one) of _____ or, in New York City, the Clerk of Community Board# Five (5) Borough of Manhattan, where the premises are located.

STATEMENT OF AREA PLAN

Applicants for ON-PREMISES and LIQUOR STORE licenses must complete Section D.

List all schools, places of worship and on-premises licenses within 200 feet of the proposed licensed premises. Indicate distance from proposed premises.

If none exist, check here:

X

- (1) Name: _____
Address: _____
Distance: _____
- (2) Name: _____
Address: _____
Distance: _____
- (3) Name: _____
Address: _____
Distance: _____
- (4) Name: _____
Address: _____
Distance: _____
- (5) Name: _____
Address: _____
Distance: _____
- (6) Name: _____
Address: _____
Distance: _____
- (7) Name: _____
Address: _____
Distance: _____
- (8) Name: _____
Address: _____
Distance: _____

(If more space is needed, attach additional sheets.)

LANDLORD IDENTIFICATION QUESTIONNAIRE

Landlord must complete this section for all applications, EXCEPT Grocery and Drug store Beer.

- 1.) Name of Landlord 485 MADISON ASSOCIATES
 2.) Premises address 485 Madison Avenue a/k/a 34 E. 52nd St., N.Y., N.Y.

(Premises to be licensed)

- 3.) Type of ownership:

Individual _____
 Proprietorship _____
 Partnership X _____
 Corporation _____

- 4.) Principals:

Name

Address

485 Madison Corp., General Partner, 110 E. 59th St., N. Y., N. Y. 10022

Tower 485, L.P., General Partner, 600 Madison Avenue, N. Y., N. Y. 10022

LIMITED PARTNERS -- See Schedule "A" attached

- 5(a) Are any persons listed on this form police officers? NO X YES _____

- (b) If YES, list names: _____

- 6(a) Are any persons listed on this form currently or previously licensed under the ABC law? NO X YES _____

- (b) If YES, list names and license numbers: _____

485 MADISON ASSOCIATES, Landlord

By: 485 Madison Corp., General Partner

By: [Signature] v.p.

-and-

Tower 485, L.P., General Partner, By: [Signature] Tower 485 Corp., General Partner

Signature of LANDLORD: [Signature]

Title: Vice President

IMPORTANT - Signature must be same as signature on original lease--if not; furnish either affidavit in explanation, affix legible corporate seal or submit other proof of signature's authority.

Part of L.L. I.D. (RB)

SCHEDULE "A"

4. Continued:

Principal

Address

LIMITED PARTNERS:

PRCGC Partners, L. P.

Pearl Resnick

Burton P. Resnick

Judith B. Resnick

Marilyn L. Katz

Stanley M. Katz

Susan Fisher

Ira Resnick

Asriel Rackow

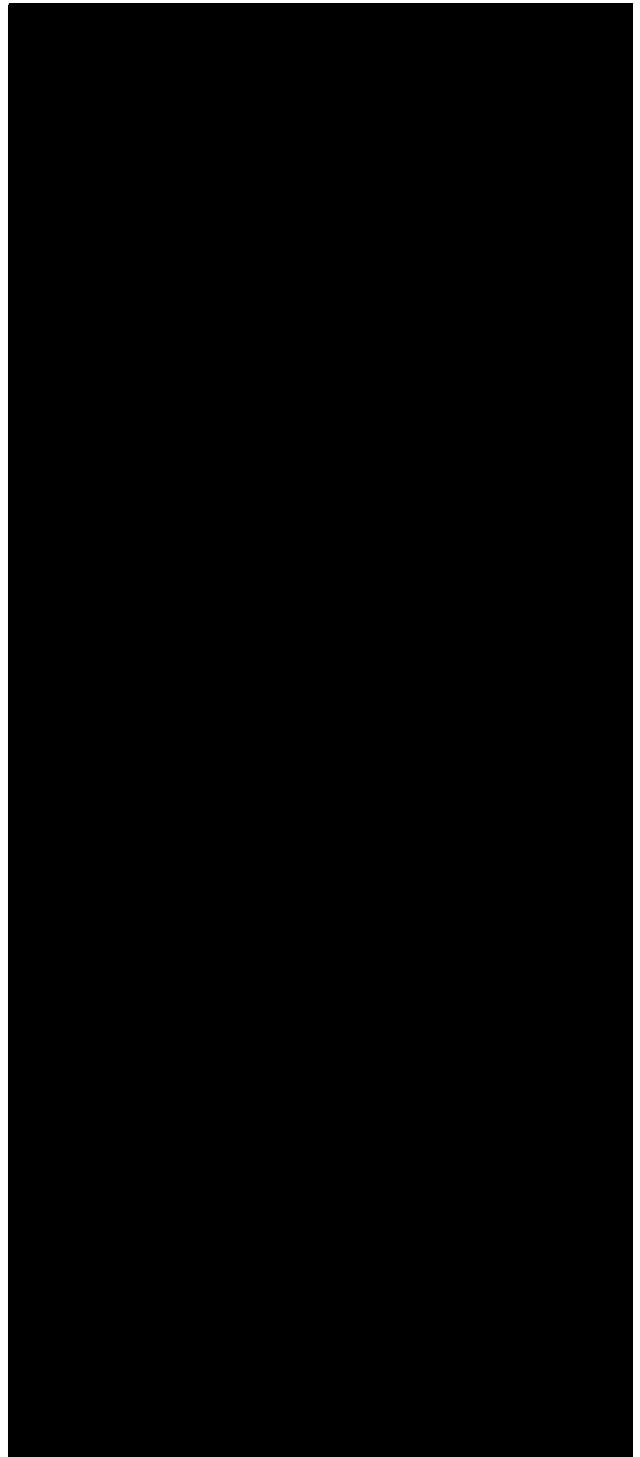
Estate of Arthur B. Belfer

Diane Belfer

Kathi Belfer Cypress

Kenneth Mark Endelson

Henriette Belfer



ON-PREMISES ESTABLISHMENT QUESTIONNAIRE

All applicants for a license to sell alcoholic beverages for consumption on-premises must complete Section F.

Neighborhood

1.(a) Type of neighborhood?

Residential _____
Business X
Shopping Mall _____

(b) Population density:

Normal _____
Congested X
Resort _____

(c) Business or residential street?

BUSINESS

(d) Within a radius of 250 feet of a school, church or synagogue in any direction?

NO X YES _____

(e) If so, within how many feet?

(f) Is it on the same street or avenue?

NO X YES _____

(g) Is school, church or synagogue used exclusively for religious or education purposes?

NO _____ YES _____ *N/A*

(h) Is there any local option restriction in this area (Dry, Partially Dry)?

NO X YES _____

(i) If so, explain:

Premises (exterior)

2.(a) Type of building:

CONCRETE

(b) What was prior occupant of premises?

RESTAURANTE

(c) Is view from street clear and unobstructed?

NO _____ YES X

(d) If not, state reason:

(e) Any outside area used for the sale or consumption of alcoholic beverages?

NO X YES _____

(f) If so, describe:

(g) Are the premises to be licensed divided in any way, by a public or private highway, thoroughfare, passageway, etc., over which applicant does not have an exclusive possession and control?

NO ☒ YES ☐

(h) If so, describe:

Premises (interior)

3. (a) On street level?

NO ☐ YES ☒

(b) If not, what floor?

(c) How many floors do the premises occupy?

1 Floor + Portions of
Basement + Mezzanine.

(d) How many rooms on each floor?

2 rooms 1st Floor.
2 rooms Mezzanine

(e) Use of rooms?

Dining room, bar and
Kitchen.

(f) How many toilets?

2

(g) If more than one floor what is the access between floors?

Stairs

(h) What is the maximum number of persons that can legally occupy the premises?

196

(i) Number of tables?

52

(j) Number of seats at tables?

198

(k) Is the interior view unobstructed throughout?

NO ☐ YES ☒

(l) If not, state reason:

(m) Are premises sufficiently illuminated?

NO ☐ YES ☒

(n) If booths, how high?

No Booths

(o) Any openings to other parts of the building?

NO ☒ YES ☐

(p) If so, describe:

Bars

4. (a) How many stand-up bars are located on the premises?

One

(b) How many service bars?

One

PROPOSED METHOD OF OPERATION

All applicants for a license to sell alcoholic beverage for consumption on-premises must complete Section G.

1.) What type of establishment will this be?
(e.g. restaurant, tavern, disco, etc.)

RESTAURANTE

2.) Will premises have live music?

NO ☒ YES ☐

3.) Will premises permit dancing?

NO ☒ YES ☐

4.) Will premises have other kinds of entertainment?

NO ☒ YES ☐

If YES, describe:

5.) What are the proposed hours of operation?

NOON - 2:00 A.M.

6.) Will the applicant principals leave their present employment?

YES

7.) Will the applicant devote full or part-time to the applied for premises?

Full-time ☒
Part-time ☐

8.) Will the business employ a Manager?

NO ☒ YES ☐

9.) Name(s) of Manager(s):

10.) How many employees? (Describe positions)

12 total - cook, assistant
cook, waiters, dishwashers,
coat person.

11.) Will there be security personnel?

NO ☒ YES ☐

If YES, how many?

(c) Describe all bars (length, shape and location):

Located near entrance on ground
Floor; circular shape;
approximately 18 feet in length.

(d) Any food counters?

NO X YES

(e) If so, describe:

Kitchen

1st Floor in Rear

5.(a) Location and size of kitchen, if any:

(b) Is food available for sale?

NO YES X

(c) If so, describe type of food?

Upscale cuisine

(d) Is a chef employed?

NO YES X

(e) What other kitchen help is employed?

Dishwashers, assistant cooks,
waiters + waitresses.

Permits

6.(a) Has premises been issued a Board of Health permit?

NO YES PENDING

(b) Do premises have a sidewalk cafe?

NO X YES

(c) Has permit been obtained?

NO YES N/A

(d) Any pool tables?

NO X YES

(e) If so, provide dimensions?

NO YES

(f) Names of Vendors:

Unavailable at this
time.

Hotel

7.(a) Type of Hotel:

Transient
Apartment N/A
Summer

(b) Is building used solely as a Hotel?

NO YES

(c) How many floors?

N/A

(d) How many rooms?

N/A

(e) Describe dining room facilities:

N/A

	BANK

	WATCHES- JEWELRY

- MADISON AVENUE -

	SKIN & HAIR PRODUCTS
	DELI- SALAD BAR
	APPLICANT
	COMPUTER SOFTWARE
	OFFICE BUILDING
	OPTICAL
	BUILDING SERVICE ENTRANCE
	OFFICE BUILDING
	SPACE FOR RENT

- EAST 52ND STREET -

	OPTICIANS
	PHARMACY- VARIETY
	OFFICE BUILDING
	MENS CLOTHING
	OFFICE BUILDING
	BANK

AREA SURVEY
34 EAST 52ND STREET
NEW YORK, N.Y.
AUG. 12, 1993: NOT-TO-SCALE-

- PARK AVENUE -

	BANK
--	------

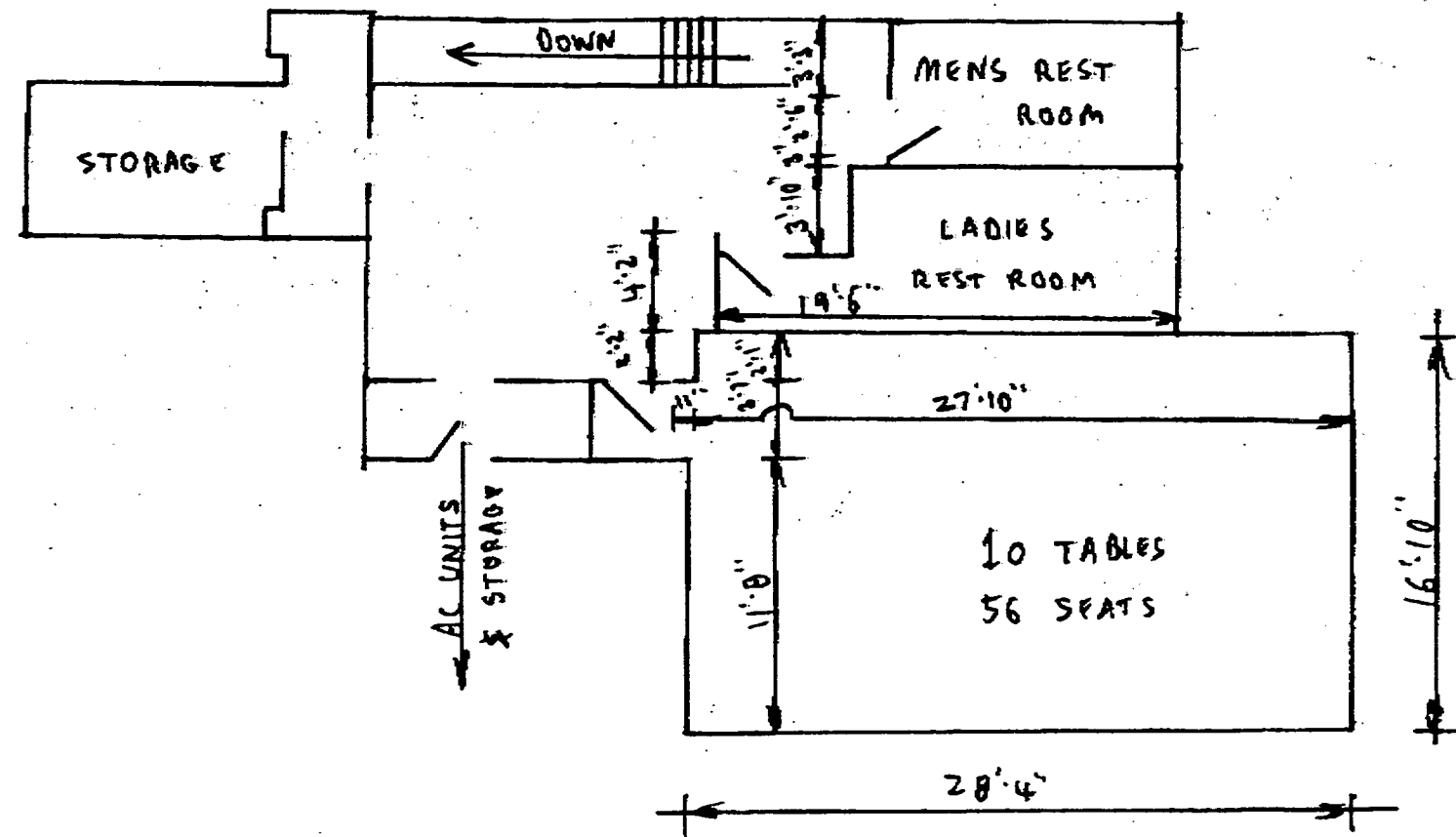
	OFFICE BUILDING
--	--------------------

INTERIOR DIAGRAM- 2ND FLOOR

34 EAST 52ND STREET

NEW YORK, N.Y.

AUG. 12, 1993: SCALE: 1/8" = 1'-0"

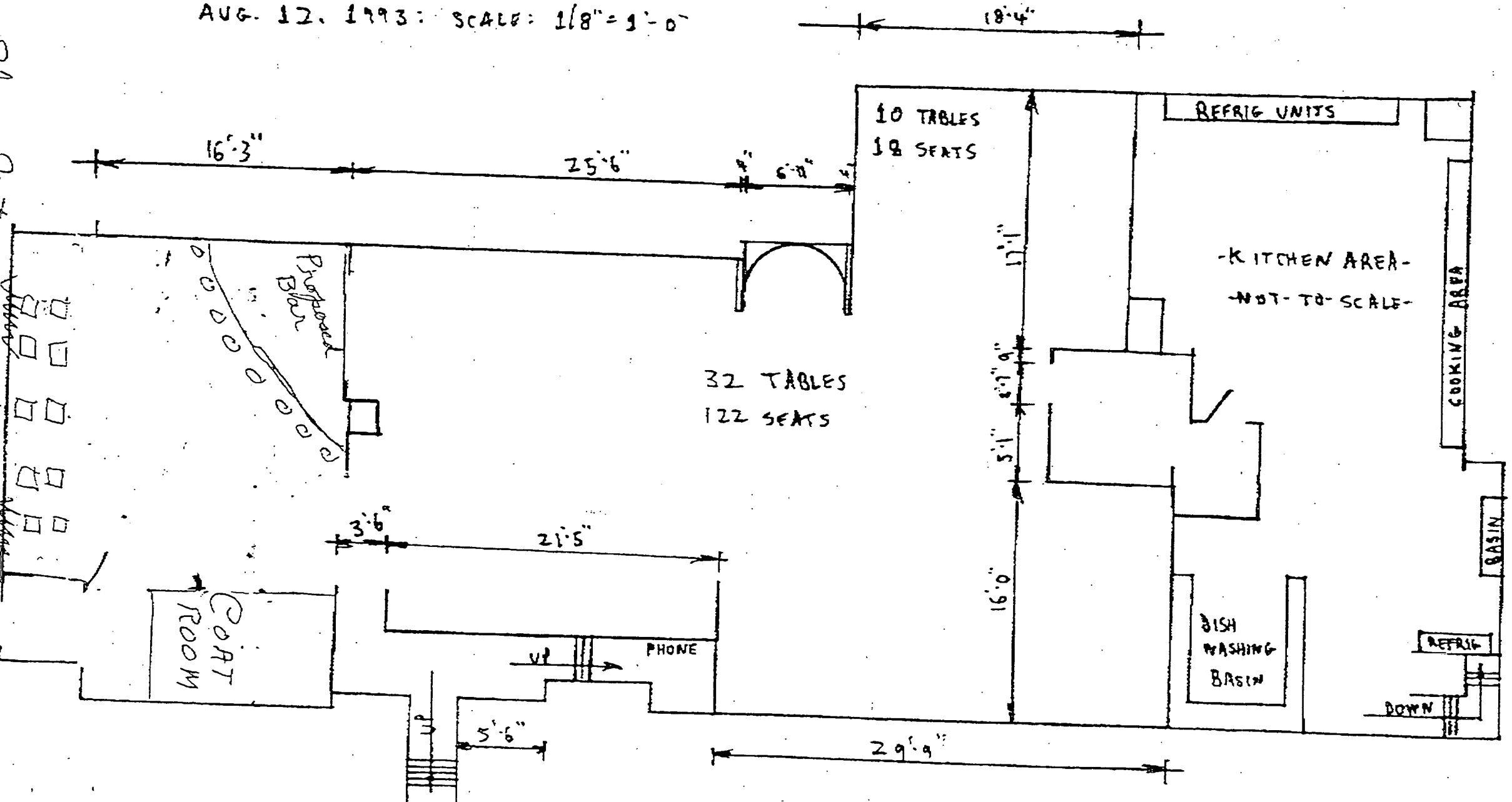


INTERIOR DIAGRAM PROPOSED

34 EAST 52ND STREET

NEW YORK, N.Y.

AUG. 12, 1993: SCALE: 1/8" = 1'-0"



THE CITY OF NEW YORK



DEPARTMENT OF BUILDINGS
CERTIFICATE OF OCCUPANCY

ALT 1010/81

ALT 957/86

AMENDED

BOROUGH MANHATTAN
AMENDED

DATE:

APR 05 1993

NO.

This certificate ~~XXXXXX~~ C.O. NO 64343

ZONING DISTRICT C5-3

THIS CERTIFIES that the ~~XXXX~~ altered ~~XXXXXX~~ building—premises located at

MID

485 MADISON AVENUE 28-36 EAST 52ND STREET

Block 1287 Lot 52

CONFORMS SUBSTANTIALLY TO THE APPROVED PLANS AND SPECIFICATIONS AND TO THE REQUIREMENTS OF ALL APPLICABLE LAWS, RULES, AND REGULATIONS FOR THE USES AND OCCUPANCIES SPECIFIED HEREIN.

PERMISSIBLE USE AND OCCUPANCY

STORY	LIVE LOAD LBS. PER SQ. FT.	MAXIMUM NO. OF PERSONS PERMITTED	ZONING DWELLING OR ROOMING UNITS	BUILDING CODE HABITABLE ROOMS	ZONING USE GROUP	BUILDING CODE OCCUPANCY GROUP	DESCRIPTION OF USE
CELLAR	OG	75					STORAGE, MECHANICAL EQUIPMENT, ACCESSORY AREA OF EATING AND DRINKING PLACE, EMPLOYEES LOCKER AND DINING ROOM
1ST FLOOR	100	400					STORES, LOBBY AND EATING AND DRINKING PLACE, USE GROUP 6
MEZZANINE		35					ACCESSORY OFFICE LOUNGE, TOILETS EATING AND DRINKING PLACE
	75				6		
2ND FLOOR	120	73			6		OFFICES STORAGE, MECH. ROOMS
3RD TO 8TH FLOORS	120 ea.	73 ea.					OFFICES ON EACH FLOOR
9TH TO 14TH FLOORS	120 ea.	65 ea.					OFFICES ON EACH FLOOR
15TH TO 17TH FLOORS	60 ea.	73 ea.					OFFICES ON EACH FLOOR
18TH TO 20TH FLOORS	60 ea.	60 ea.					OFFICES ON EACH FLOOR
21ST TO	60	49					OFFICES ON EACH

(CONTINUED)

OPEN SPACE USES

(SPECIFY—PARKING SPACES, LOADING BERTHS, OTHER USES, NONE)

M. G.

NO CHANGES OF USE OR OCCUPANCY SHALL BE MADE UNLESS
A NEW AMENDED CERTIFICATE OF OCCUPANCY IS OBTAINED

THIS CERTIFICATE OF OCCUPANCY IS ISSUED SUBJECT TO FURTHER LIMITATIONS, CONDITIONS AND
SPECIFICATIONS NOTED ON THE REVERSE SIDE

Valery B...
BOROUGH SUPERINTENDENT

M-5

COMMISSIONER

☒ ORIGINAL

☐ OFFICE COPY - DEPARTMENT OF BUILDINGS

☐ COPY

B Form 54 (Back) (Rev. 8-82)

THAT THE ZONING LOT ON WHICH THE PREMISES IS LOCATED IS BOUNDED AS FOLLOWS:

BEGINNING at a point on the SOUTH side of EAST 52ND STREET
distant 0 EAST feet from the corner formed by the intersection of
MADISON AVENUE and EAST 52ND STREET
running thence EAST 124'-6" feet; thence SOUTH 100'-5" feet;
thence WEST 124'-6" feet; thence NORTH 100'-5" feet;
thence to the point or place of beginning. feet;

NO. 1010 | 89 DATE OF COMPLETION 3 | 19 | 93 CONSTRUCTION CLASSIFICATION CLASS 1 FIREPROOF
BUILDING OCCUPANCY GROUP CLASSIFICATION HEIGHT STORIES FEET
COMMERCIAL 24 PH 263'-4"

THE FOLLOWING FIRE DETECTION AND EXTINGUISHING SYSTEMS ARE REQUIRED AND WERE INSTALLED IN COMPLIANCE WITH APPLICABLE LAWS.

	YES	NO		YES	NO
STANDPIPE SYSTEM EXIST	X		AUTOMATIC SPRINKLER SYSTEM		
YARD HYDRANT SYSTEM					
STANDPIPE FIRE TELEPHONE AND SIGNALLING SYSTEM					
SMOKE DETECTOR					
FIRE ALARM AND SIGNAL SYSTEM					

STORM DRAINAGE DISCHARGES INTO:

A) STORM SEWER ☐ B) COMBINED SEWER ☐ C) PRIVATE SEWAGE DISPOSAL SYSTEM ☐

SANITARY DRAINAGE DISCHARGES INTO:

A) SANITARY SEWER ☐ B) COMBINED SEWER ☐ C) PRIVATE SEWAGE DISPOSAL SYSTEM ☐

LIMITATIONS OR RESTRICTIONS:

BOARD OF STANDARDS AND APPEALS CAL. NO. _____

CITY PLANNING COMMISSION CAL. NO. _____

OTHERS: _____

THE CITY OF NEW YORK



DEPARTMENT OF BUILDINGS
CERTIFICATE OF OCCUPANCY

ALT. 1010/77
ALT. 957/86
AMENDED

BOROUGH ~~MANHATTAN~~ AMENDED

DATE APR 05 1993 NO.

This certificate expires C.O. NO

64343

ZONING DISTRICT C5-3

THIS CERTIFIES that the ~~XXXX~~ altered ~~XXXX~~ building premises located at

MID

485 MADISON AVENUE 28-36 EAST 52ND STREET

Block 1287

Lot 52

CONFORMS SUBSTANTIALLY TO THE APPROVED PLANS AND SPECIFICATIONS AND TO THE REQUIREMENTS OF ALL APPLICABLE LAWS, RULES, AND REGULATIONS FOR THE USES AND OCCUPANCIES SPECIFIED HEREIN.

S.E.C.

PERMISSIBLE USE AND OCCUPANCY

STORY	LIVE LOAD LBS. PER SQ. FT.	MAXIMUM NO. OF PERSONS PERMITTED	ZONING DWELLING OR ROOMING UNITS	BUILDING CODE HABITABLE ROOMS	ZONING USE GROUP	BUILDING CODE OCCUPANCY GROUP	DESCRIPTION OF USE
23RD FLOORS	ea.	ea.					FLOOR
24TH FLOOR	60	24					OFFICES
PENTHOUSE	40						TWO (2) APARTMENTS
			OLD CODE				

FIRE DEPARTMENT APPROVALS:

STANDPIPE SYSTEM - APRIL 8, 1963.
INTERIOR FIRE ALARM SYSTEM FEBRUARY 25, 1963.

THIS CERTIFICATE MUST BE POSTED
WITHIN THE BUILDING WITH THE RULES
OF THE DEPARTMENT. EXPIRES MARCH 31ST, 1987.

OPEN SPACE USES

(SPECIFY—PARKING SPACES, LOADING BERTHS, OTHER USES, NONE)

M.G.

NO CHANGES OF USE OR OCCUPANCY SHALL BE MADE UNLESS
A NEW AMENDED CERTIFICATE OF OCCUPANCY IS OBTAINED

THIS CERTIFICATE OF OCCUPANCY IS ISSUED SUBJECT TO FURTHER LIMITATIONS, CONDITIONS AND
SPECIFICATIONS NOTED ON THE REVERSE SIDE.

Valery...

...

BOROUGH SUPERINTENDENT

COMMISSIONER

☒ ORIGINAL

☐ OFFICE COPY - DEPARTMENT OF BUILDINGS

☐ COPY

AFFIDAVIT

I, Marion Scotto, the applicant for a on-premises license understand that all information I submit will be relied upon by the State Liquor Authority and a false statement or misrepresentation will constitute cause for the disapproval of the application or revocation of any license for which this application is submitted.

I verify that statements made on all forms and all papers in support of this application are true and if any change occurs prior to the receipt of the license, I will notify the Authority by registered or certified mail within 48 hours, or if change occurs after receipt of the license, I will notify the Authority similarly within 10 days. I understand that failure to give the required notice will violate the Alcoholic Beverage Control Law and may result in revocation of the license.

I certify that I know the contents of the above application and statements contained therein and the same are true to my knowledge.

Marion Scotto

Signature

8/19/93

Date

COUNTY OF New York)
) SS
 STATE OF New York)

On the 19th day of August of 1993 before me personally came MARION SCOTTO to me known and known to me to be the individual described in and who executed the forgoing instrument and SHE acknowledged to me that SHE executed the same.

Gary J. Panni

NEW YORK STATE
 NOTARY PUBLIC # 5008171
 COMMISSION EXPIRES 2/16/95
 QUALIFIED IN
 WESTCHESTER COUNTY

PERSONAL QUESTIONNAIRE

- A. All principals to the license application must complete this questionnaire in full.
 B. Make duplicate blank forms as necessary.
 C. Answer all questions below and check the appropriate spaces.
 D. Attach additional sheets if more space is needed.

1.) **APPLICANT NAME** STARJEM RESTAURANT INC.

Premises Address 485 MADISON AVENUE

County NEW YORK

2.) **YOUR NAME** MARION SCOTTO

Address [REDACTED]

Social Security No. [REDACTED]

Date of Birth [REDACTED]

Telephone No. [REDACTED]

3.) List any other name or names you have been known by (including maiden name) and the reason for changing your name: _____

4.) Height 5'4" Weight 135 lbs Marital Status MARRIED
 Sex F Hair Color BLOND

5.) U.S. Citizen? NO YES X
 Country of Birth: USA
 If Alien, state Registration No. or Visa Type: _____

6.) Former Residences for past ten years:

Address

FROM (mo./yr.) TO (mo./yr.)

[REDACTED]

7.) Your Occupation record for the past ten years:

FROM/TO (mo./yr.)	Employer	Type of Business	Address	Occupation
1/87 - 1992	VIP CELEBRATION PARTY PLANNERS	8220 11th AVENUE	PARTY PLANNER	
		BROOKLYN, NEW YORK 11222		
Prior to 1987 APPLICANT WAS HOUSEWIFE				

8.) **NAME OF SPOUSE** ANTHONY SCOTTO

Address [REDACTED]

Social Security No. [REDACTED]

Telephone No. [REDACTED]

9.) Position (or interest) you will hold in the license application (Check each):

President	<u>X</u>	Management Agent	___	Broker	___
V. President	___	Landlord	___	Vendor	___
Secretary	___	Stockholder	___	Contractor	___
Treasurer	___	Partner	___	Franchisor	___
Chairman	___	General Partner	___	Guarantor	___
Officer	___	Limited Partner	___	Donor	___
Director	___	Sole Proprietor	___	Lender	___
Manager	<u>X</u>	OTHER:	_____		

10(a) If you are an Applicant (i.e., proprietor, partner, or stockholder) or Applicant's spouse, will you continue your present occupation or business? NO X YES ___
Not Applicable ___

(b) If Yes, list hours you will devote to business sought to be licensed: _____

11(a) Do you have any interest, direct or indirect, in any premises or business where any alcoholic beverage is manufactured, transported or sold at wholesale or retail, whether by stock ownership, interlocking directors, mortgage or lien on, or ownership of any real or personal property, or by any other means including loans? NO X YES ___

(b) If Yes, provide information below:

Business Name	Type of Business	Your Interest (Date began)	Business Address	Liquor License	Federal ID No.
---------------	------------------	----------------------------	------------------	----------------	----------------

12(a) Other than as itemized in the above, have you ever applied anywhere for a license or permit to traffic in alcoholic beverages, including any application as a partnership or corporation in which you are/were a principal? NO X YES ___

(b) If YES, provide information below:

Name of applicant/	Address of premises	State	Date of filing	License No.	Disposition
--------------------	---------------------	-------	----------------	-------------	-------------

13(a) Has a license or permit listed above been REVOKED, CANCELLED or otherwise Involuntarily Terminated?

NO ☒ YES ☐

(b) If YES, state action and date of action:

14(a) Will you take an active part in the operation of the business to be licensed?

NO ☐ YES ☒

(b) If YES, explain nature of activity:

RESTAURANT & BAR MANAGER

15(a) Are you a police commissioner, other police official, subordinate of any police department, a Sheriff, Deputy, Under-Sheriff or any Peace Officer?

NO ☒ YES ☐

(b) If YES, provide details:

16(a) Have you ever been CONVICTED (including pleas of guilty or suspended sentences) of any felony, misdemeanor (including driving while intoxicated or impaired) or any other type of offense EXCEPT MINOR TRAFFIC INFRACTIONS?

NO ☒ YES ☐

(b) If YES, attach a Certificate of Disposition by the court clerk for each case and a Certificate of Relief from disabilities if available and submit an affidavit explaining all details. If you have reported all convictions to this authority and were subsequently approved for a license, check here --

Approved ☐

17(a) Are there any ARRESTS, INDICTMENTS or SUMMONSES other than minor traffic infractions PENDING against you (including driving while intoxicated or impaired)?

NO ☒ YES ☐

(b) If YES, provide copy of accusatory instrument.

18.) If you are an applicant (i.e. proprietor, partner, or stockholder), would any of the above questions require a YES answer if asked of your spouse?

NO ☒ YES ☐
NOT an applicant ☐

19.) If you answered YES to the above question or if your spouse will aid in the management of the applicant business, check here and your spouse must complete a personal questionnaire.

Spouse will complete questionnaire; ☐

20.) Do you or did you have a family, business or social relationship with the landlord, tenant or last licensee of the premises to be licensed?

NO X YES

21.) FINANCES

State TOTAL AMOUNT OF MONEY you are providing the applicant \$ 470,000.

Type of Investment (Investment/Loan/Contract-debt)	\$Amount	Source of Funds (Accounts, Loans, Gifts, Asset Sales, etc.) (enter identification numbers for accounts)
INVESTMENT	\$ 470,000.	HOME EQUITY LOAN ON 8220 11th AVENUE BROOKLYN FROM HAMILTON FEDERAL SAVINGS BANK AT 9201 4th AVENUE BROOKLYN, NEW YORK

IMPORTANT - Submit any and all records, documents and affidavits that you feel may assist you in explaining the source of monies you will provide the applicant.

EXAMPLES OF DOCUMENTS TO SUBMIT: A. Loan or gift letter. B. Copy of bank or stock account from which funds will be loaned or gifted. From these accounts, copy of name page and all pages going back one year. Circle or highlight unusual deposits and explain. If funds were transferred from another account or previous bank book(s), copy the name page and all pages going back one year for that book.

If you are guaranteeing a loan as a co-signer or putting up something of value as collateral.

Identify Co-Signer or Collateral Identify Loan/ Describe Collateral

I understand that the information I submit will be relied upon by the State Liquor Authority and a false statement or misrepresentation will constitute cause for the disapproval of the application or revocation of any license for which this application is submitted.

I verify that statements made herein are true and if any change occurs prior to the receipt of the license, I will notify the Authority by registered or certified mail within 48 hours or if change occurs after receipt of the license, I will notify the Authority similarly within 10 days. I understand that failure to give the required notice will violate the Alcoholic Beverage Control Law and may result in revocation of the license.

Marion Scott

Signature

8/19/93
Date

PERSONAL QUESTIONNAIRE

- A. All principals to the license application must complete this questionnaire in full.
 B. Make duplicate blank forms as necessary.
 C. Answer all questions below and check the appropriate spaces.
 D. Attach additional sheets if more space is needed.

1.) **APPLICANT NAME** STARJEM RESTAURANTE INC.

Premises Address 485 MADISON AVENUE

County NEW YORK

2.) **YOUR NAME** ELAINA SCOTTO

Address [REDACTED]

Social Security No. [REDACTED]

Date of Birth [REDACTED]

Telephone No. [REDACTED]

3.) List any other name or names you have been known by (including maiden name) and the reason for changing your name: _____

4.) **Height** 5'5" **Weight** 120 lbs **Marital Status** SINGLE
Sex F **Hair Color** BROWN

5.) **U.S. Citizen?**

Country of Birth: USA

NO **YES** x

If Alien, state Registration No. or Visa Type: _____

6.) **Former Residences for past ten years:**

Address

FROM (mo./yr.) TO (mo./yr.)

[REDACTED]

7.) **Your Occupation record for the past ten years:**

FROM/TO (mo./yr.)	Employer	Type of Business	Address	Occupation
7/92 - 8/92	AMSCO RESTAURANTE	155 EAST 55th STREET NY, NY	PUBLIC RELATIONS	
8/91 - 7/92	ROBERT COMSTOCK	1776 BROADWAY NEW YORK, NEW YORK	PUBLIC RELATIONS	
1/90 - 8/91	BIDERMANN IND.	575 5th AVENUE NEW YORK, NEW YORK	PUBLIC RELATIONS	

8.) **NAME OF SPOUSE** N/A

Address _____

Social Security No. _____

Telephone No. _____

9.) Position (or interest) you will hold in the license application (Check each):

President	___	Management Agent	___	Broker	___
V. President	<u>x</u>	Landlord	___	Vendor	___
Secretary	___	Stockholder	<u>x</u>	Contractor	___
Treasurer	___	Partner	___	Franchisor	___
Chairman	___	General Partner	___	Guarantor	___
Officer	___	Limited Partner	___	Donor	___
Director	___	Sole Proprietor	___	Lender	___
Manager	___	OTHER:	_____		

10(a) If you are an Applicant (i.e., proprietor, partner, or stockholder) or Applicant's spouse, will you continue your present occupation or business? NO x YES ___
Not Applicable ___

(b) If Yes, list hours you will devote to business sought to be licensed: _____

11(a) Do you have any interest, direct or indirect, in any premises or business where any alcoholic beverage is manufactured, transported or sold at wholesale or retail, whether by stock ownership, interlocking directors, mortgage or lien on, or ownership of any real or personal property, or by any other means including loans? NO x YES ___

(b) If Yes, provide information below:

Business Name	Type of Business	Your Interest (Date began)	Business Address	Liquor License	Federal ID No.
---------------	------------------	----------------------------	------------------	----------------	----------------

12(a) Other than as itemized in the above, have you ever applied anywhere for a license or permit to traffic in alcoholic beverages, including any application as a partnership or corporation in which you are/were a principal? NO x YES ___

(b) If YES, provide information below:

Name of applicant/	Address of premises	State	Date of filing	License No.	Disposition
--------------------	---------------------	-------	----------------	-------------	-------------

13(a) Has a license or permit listed above been REVOKED, CANCELLED or otherwise Involuntarily Terminated?

NO X YES

(b) If YES, state action and date of action:

14(a) Will you take an active part in the operation of the business to be licensed?

NO YES X

(b) If YES, explain nature of activity:

MANAGING THE OPERATIONS

15(a) Are you a police commissioner, other police official, subordinate of any police department, a Sheriff, Deputy, Under-Sheriff or any Peace Officer?

NO X YES

(b) If YES, provide details:

16(a) Have you ever been CONVICTED (including pleas of guilty or suspended sentences) of any felony, misdemeanor (including driving while intoxicated or impaired) or any other type of offense EXCEPT MINOR TRAFFIC INFRACTIONS?

NO X YES

(b) If YES, attach a Certificate of Disposition by the court clerk for each case and a Certificate of Relief from disabilities if available and submit an affidavit explaining all details. If you have reported all convictions to this authority and were subsequently approved for a license, check here --

Approved

17(a) Are there any ARRESTS, INDICTMENTS or SUMMONSES other than minor traffic infractions PENDING against you (including driving while intoxicated or impaired)?

NO X YES

(b) If YES, provide copy of accusatory instrument.

18.) If you are an applicant (i.e. proprietor, partner, or stockholder), would any of the above questions require a YES answer if asked of your spouse?

NO X YES
NOT an applicant

19.) If you answered YES to the above question or if your spouse will aid in the management of the applicant business, check here and your spouse must complete a personal questionnaire.

Spouse will complete
questionnaire;

20.) Do you or did you have a family, business or social relationship with the landlord, tenant or last licensee of the premises to be licensed?

NO ☒ YES ☐

21.) FINANCES

State TOTAL AMOUNT OF MONEY you are providing the applicant \$ 0

Type of Investment (Investment/Loan/Contract-debt)	\$Amount	Source of Funds (Accounts, Loans, Gifts, Asset Sales, etc.) (enter identification numbers for accounts)

IMPORTANT - Submit any and all records, documents and affidavits that you feel may assist you in explaining the source of monies you will provide the applicant.

EXAMPLES OF DOCUMENTS TO SUBMIT: A. Loan or gift letter. B. Copy of bank or stock account from which funds will be loaned or gifted. From these accounts, copy of name page and all pages going back one year. Circle or highlight unusual deposits and explain. If funds were transferred from another account or previous bank book(s), copy the name page and all pages going back one year for that book.

If you are guaranteeing a loan as a co-signer or putting up something of value as collateral.

Identify Co-Signer or Collateral	Identify Loan/ Describe Collateral

I understand that the information I submit will be relied upon by the State Liquor Authority and a false statement or misrepresentation will constitute cause for the disapproval of the application or revocation of any license for which this application is submitted.

I verify that statements made herein are true and if any change occurs prior to the receipt of the license, I will notify the Authority by registered or certified mail within 48 hours or if change occurs after receipt of the license, I will notify the Authority similarly within 10 days. I understand that failure to give the required notice will violate the Alcoholic Beverage Control Law and may result in revocation of the license.

Elani Scott

Signature

8/19/93

Date

- 1.) **APPLICANT NAME** STARJEM RESTAURANTE INC.

County NEW YORK

- 2.) YOUR NAME ROSANNA SCOTTO

Social Security No.

Date of Birth

Telephone No.

- 3.) List any other name or names you have been known by (including maiden name) and the reason for changing your name:
- ROSANNA RUGGIERO

4.) Height 5'4" Weight 125lbs Marital Status MARRIED
Sex F Hair Color BROWN

- 5.) U.S. Citizen? NO ☐ YES ☒
Country of Birth: USA
If Alien, state Registration No. or Visa Type: _____

- 6.) Former Residences for past ten years:

Address

FROM (mo./yr.) TO (mo./yr.)

- 7.) Your Occupation record for the past ten years:

FROM/TO (mo./yr.)	Employer	Type of Business	Address	Occupation
3/86-PRESENT	FOX 5 NEWS	BROADCASTING	205 EAST 67TH STREET	REPORTER
10/82-12/85	EYEWITNESS NEWS		7 LINCOLN SQUARE NY	REPORTER

- 8.) NAME OF SPOUSE LOUIS RUGGIERO

Address

Social Security No.

Telephone No.

9.) Position (or interest) you will hold in the license application (Check each):

President	___	Management Agent	___	Broker	___
V. President	___	Landlord	___	Vendor	___
Secretary	___	Stockholder	<u>X</u>	Contractor	___
Treasurer	___	Partner	___	Franchisor	___
Chairman	___	General Partner	___	Guarantor	___
Officer	___	Limited Partner	___	Donor	___
Director	___	Sole Proprietor	___	Lender	___
Manager	___	OTHER:	_____		

10(a) If you are an Applicant (i.e., proprietor, partner, or stockholder) or Applicant's spouse, will you continue your present occupation or business?

NO ___ YES X
Not Applicable ___

(b) If Yes, list hours you will devote to business sought to be licensed:

None

11(a) Do you have any interest, direct or indirect, in any premises or business where any alcoholic beverage is manufactured, transported or sold at wholesale or retail, whether by stock ownership, interlocking directors, mortgage or lien on, or ownership of any real or personal property, or by any other means including loans?

NO X YES ___

(b) If Yes, provide information below:

Business Name	Type of Business	Your Interest (Date began)	Business Address	Liquor License	Federal ID No.

12(a) Other than as itemized in the above, have you ever applied anywhere for a license or permit to traffic in alcoholic beverages, including any application as a partnership or corporation in which you are/were a principal?

NO X YES ___

(b) If YES, provide information below:

Name of applicant/	Address of premises	State	Date of filing	License No.	Disposition

13(a) Has a license or permit listed above been REVOKED, CANCELLED or otherwise Involuntarily Terminated?

NO X YES

(b) If YES, state action and date of action:

14(a) Will you take an active part in the operation of the business to be licensed?

NO X YES

(b) If YES, explain nature of activity:

15(a) Are you a police commissioner, other police official, subordinate of any police department, a Sheriff, Deputy, Under-Sheriff or any Peace Officer?

NO X YES

(b) If YES, provide details:

16(a) Have you ever been CONVICTED (including pleas of guilty or suspended sentences) of any felony, misdemeanor (including driving while intoxicated or impaired) or any other type of offense EXCEPT MINOR TRAFFIC INFRACTIONS?

NO X YES

(b) If YES, attach a Certificate of Disposition by the court clerk for each case and a Certificate of Relief from disabilities if available and submit an affidavit explaining all details. If you have reported all convictions to this authority and were subsequently approved for a license, check here --

Approved

17(a) Are there any ARRESTS, INDICTMENTS or SUMMONSES other than minor traffic infractions PENDING against you (including driving while intoxicated or impaired)?

NO X YES

(b) If YES, provide copy of accusatory instrument.

18.) If you are an applicant (i.e. proprietor, partner, or stockholder), would any of the above questions require a YES answer if asked of your spouse?

NO X YES
NOT an applicant

19.) If you answered YES to the above question or if your spouse will aid in the management of the applicant business, check here and your spouse must complete a personal questionnaire.

Spouse will complete questionnaire;

20.) Do you or did you have a family, business or social relationship with the landlord, tenant or last licensee of the premises to be licensed?

NO X YES

21.) FINANCES

State TOTAL AMOUNT OF MONEY you are providing the applicant \$ 0

Type of Investment (Investment/Loan/Contract-debt)	\$Amount	Source of Funds (Accounts, Loans, Gifts, Asset Sales, etc.) (enter identification numbers for accounts)
---	----------	---

IMPORTANT - Submit any and all records, documents and affidavits that you feel may assist you in explaining the source of monies you will provide the applicant.

EXAMPLES OF DOCUMENTS TO SUBMIT: A. Loan or gift letter. B. Copy of bank or stock account from which funds will be loaned or gifted. From these accounts, copy of name page and all pages going back one year. Circle or highlight unusual deposits and explain. If funds were transferred from another account or previous bank book(s), copy the name page and all pages going back one year for that book.

If you are guaranteeing a loan as a co-signer or putting up something of value as collateral.

Identify Co-Signer or Collateral	Identify Loan/ Describe Collateral
----------------------------------	------------------------------------

I understand that the information I submit will be relied upon by the State Liquor Authority and a false statement or misrepresentation will constitute cause for the disapproval of the application or revocation of any license for which this application is submitted.

I verify that statements made herein are true and if any change occurs prior to the receipt of the license, I will notify the Authority by registered or certified mail within 48 hours or if change occurs after receipt of the license, I will notify the Authority similarly within 10 days. I understand that failure to give the required notice will violate the Alcoholic Beverage Control Law and may result in revocation of the license.

Roanna Scott
Signature

8/19/93
Date

PERSONAL QUESTIONNAIRE

- A. All principals to the license application must complete this questionnaire in full.
 B. Make duplicate blank forms as necessary.
 C. Answer all questions below and check the appropriate spaces.
 D. Attach additional sheets if more space is needed.

- 1.) **APPLICANT NAME** STARJEM RESTAURANT, INC.
ANTHONY M. SCOTTO, JR.
Premises Address 485 MADISON AVENUE
County NEW YORK
- 2.) **YOUR NAME** ANTHONY M. SCOTTO, JR.
Address [REDACTED]
Social Security No. [REDACTED]
Date of Birth [REDACTED]
Telephone No. [REDACTED]
- 3.) List any other name or names you have been known by (including maiden name) and the reason for changing your name: _____

- 4.) **Height** 5'10" **Weight** 210lbs **Marital Status** SINGLE
Sex M **Hair Color** BROWN
- 5.) **U.S. Citizen?** NO YES X
Country of Birth: USA
If Alien, state Registration No. or Visa Type: _____
- 6.) **Former Residences for past ten years:**
Address [REDACTED] **FROM (mo./yr.) TO (mo./yr.)** [REDACTED]
NONE OTHER THAN LISTED IN #2
- 7.) **Your Occupation record for the past ten years:**
- | FROM/TO (mo./yr.) | Employer | Type of Business | Address | Occupation |
|-------------------|----------------|------------------|-------------------------|-----------------|
| 12/78-5/82 | SHERATON HOTEL | HOTEL | 811 7th AVENUE NY, NY | BANQUET MANAGER |
| 7/83-4/86 | BOBBY RUBINOS | | SAN FRANCISCO, CA | GENERAL MANAGER |
| 12/86-9/89 | RIESE NY | | 5 LONG ISLAND LOCATIONS | AREA MANAGER |
- 8.) **NAME OF SPOUSE** N/A
Address _____
Social Security No. _____
Telephone No. _____

9.) Position (or interest) you will hold in the license application (Check each):

President	___	Management Agent	___	Broker	___
V. President	___	Landlord	___	Vendor	___
Secretary	<u>X</u>	Stockholder	<u>X</u>	Contractor	___
Treasurer	<u>X</u>	Partner	___	Franchisor	___
Chairman	___	General Partner	___	Guarantor	___
Officer	___	Limited Partner	___	Donor	___
Director	___	Sole Proprietor	___	Lender	___
Manager	<u>X</u>	OTHER:	_____		

10(a) If you are an Applicant (i.e., proprietor, partner, or stockholder) or Applicant's spouse, will you continue your present occupation or business?

NO X YES R
Not Applicable ___

(b) If Yes, list hours you will devote to business sought to be licensed:

Full time

11(a) Do you have any interest, direct or indirect, in any premises or business where any alcoholic beverage is manufactured, transported or sold at wholesale or retail, whether by stock ownership, interlocking directors, mortgage or lien on, or ownership of any real or personal property, or by any other means including loans?

NO ___ YES X

(b) If Yes, provide information below:

Business Name	Type of Business	Your Interest (Date began)	Business Address	Liquor License	Federal ID No.
BOBBYORRERINOSTINREST.		STOCK 12/83	FISHERMAN'S WHARF		
			SAN FRANCISCO, CA	N/A	N/A

12(a) Other than as itemized in the above, have you ever applied anywhere for a license or permit to traffic in alcoholic beverages, including any application as a partnership or corporation in which you are/were a principal?

NO X YES ___

(b) If YES, provide information below:

Name of applicant/	Address of premises	State	Date of filing	License No.	Disposition

13(a) Has a license or permit listed above been REVOKED, CANCELLED or otherwise Involuntarily Terminated?

NO X YES

(b) If YES, state action and date of action:

14(a) Will you take an active part in the operation of the business to be licensed?

NO YES X

(b) If YES, explain nature of activity:

MANAGEMENT

15(a) Are you a police commissioner, other police official, subordinate of any police department, a Sheriff, Deputy, Under-Sheriff or any Peace Officer?

NO X YES

(b) If YES, provide details:

16(a) Have you ever been CONVICTED (including pleas of guilty or suspended sentences) of any felony, misdemeanor (including driving while intoxicated or impaired) or any other type of offense EXCEPT MINOR TRAFFIC INFRACTIONS?

NO X YES

(b) If YES, attach a Certificate of Disposition by the court clerk for each case and a Certificate of Relief from disabilities if available and submit an affidavit explaining all details. If you have reported all convictions to this authority and were subsequently approved for a license, check here --

Approved

17(a) Are there any ARRESTS, INDICTMENTS or SUMMONSES other than minor traffic infractions PENDING against you (including driving while intoxicated or impaired)?

NO X YES

(b) If YES, provide copy of accusatory instrument.

18.) If you are an applicant (i.e. proprietor, partner, or stockholder), would any of the above questions require a YES answer if asked of your spouse?

NO X YES
NOT an applicant ✱

19.) If you answered YES to the above question or if your spouse will aid in the management of the applicant business, check here and your spouse must complete a personal questionnaire.

Spouse will complete questionnaire;

20.) Do you or did you have a family, business or social relationship with the landlord, tenant or last licensee of the premises to be licensed?

NO X YES

21.) FINANCES

State TOTAL AMOUNT OF MONEY you are providing the applicant \$ 0

Type of Investment (Investment/Loan/Contract-debt)	\$Amount	Source of Funds (Accounts, Loans, Gifts, Asset Sales, etc.) (enter identification numbers for accounts)

IMPORTANT - Submit any and all records, documents and affidavits that you feel may assist you in explaining the source of monies you will provide the applicant.

EXAMPLES OF DOCUMENTS TO SUBMIT: A. Loan or gift letter. B. Copy of bank or stock account from which funds will be loaned or gifted. From these accounts, copy of name page and all pages going back one year. Circle or highlight unusual deposits and explain. If funds were transferred from another account or previous bank book(s), copy the name page and all pages going back one year for that book.

If you are guaranteeing a loan as a co-signer or putting up something of value as collateral.

Identify Co-Signer or Collateral	Identify Loan/ Describe Collateral

I understand that the information I submit will be relied upon by the State Liquor Authority and a false statement or misrepresentation will constitute cause for the disapproval of the application or revocation of any license for which this application is submitted.

I verify that statements made herein are true and if any change occurs prior to the receipt of the license, I will notify the Authority by registered or certified mail within 48 hours or if change occurs after receipt of the license, I will notify the Authority similarly within 10 days. I understand that failure to give the required notice will violate the Alcoholic Beverage Control Law and may result in revocation of the license.

Cherry M. Scott
Signature

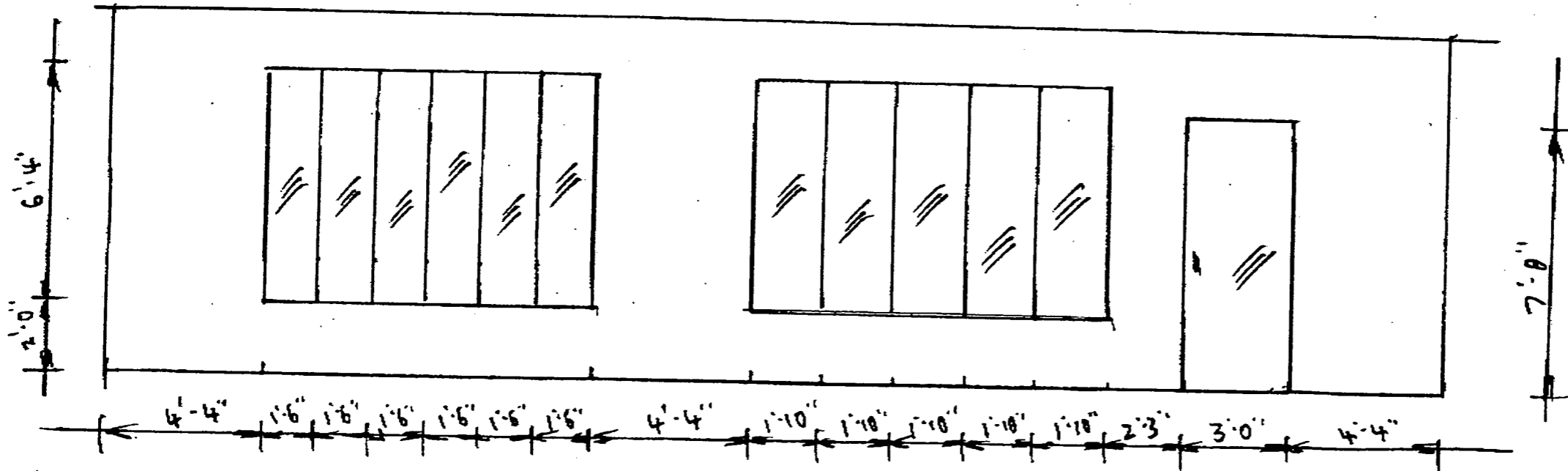
8/19/93
Date

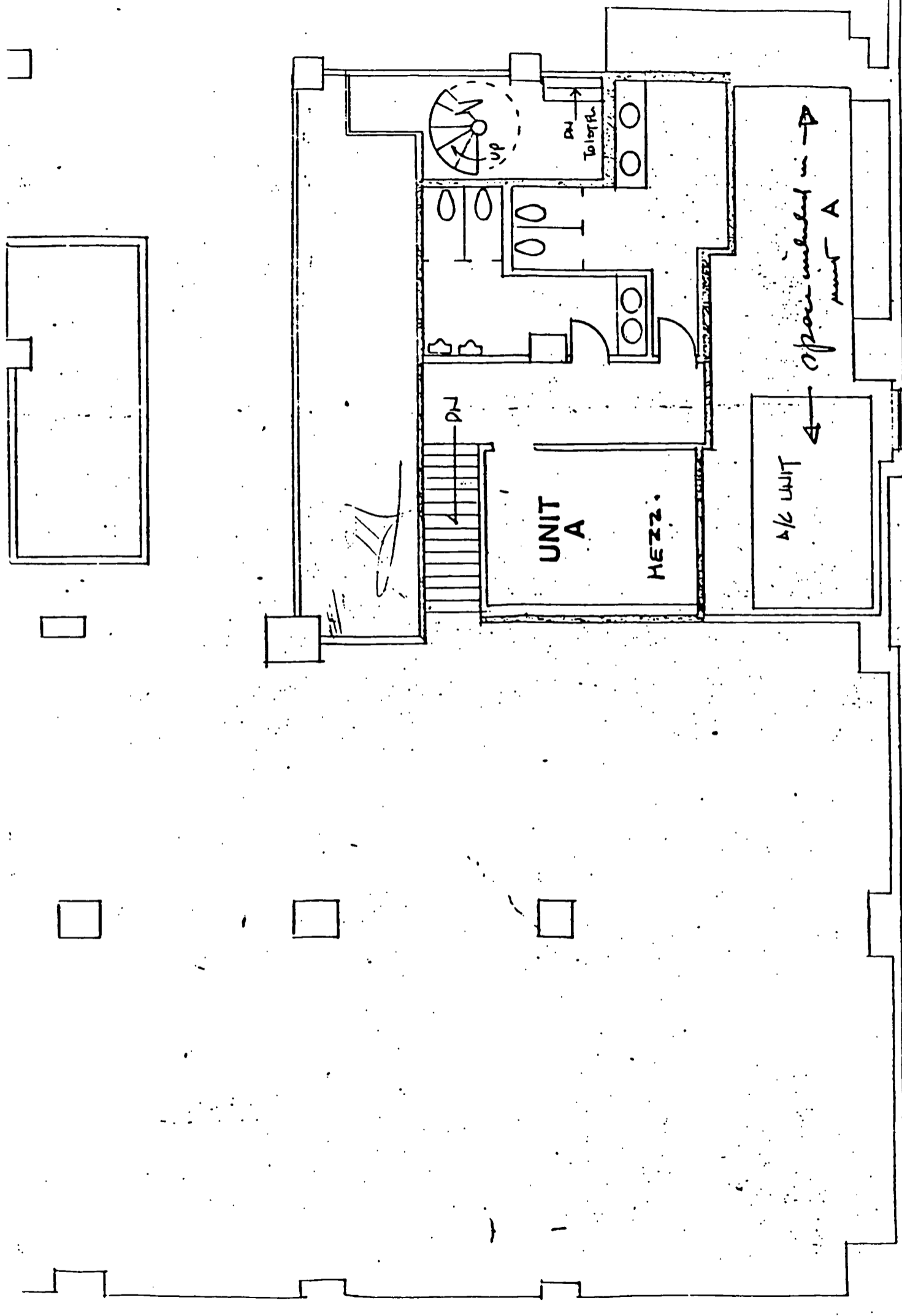
FRONT ELEVATION- PROPOSED

34 EAST 52ND STREET

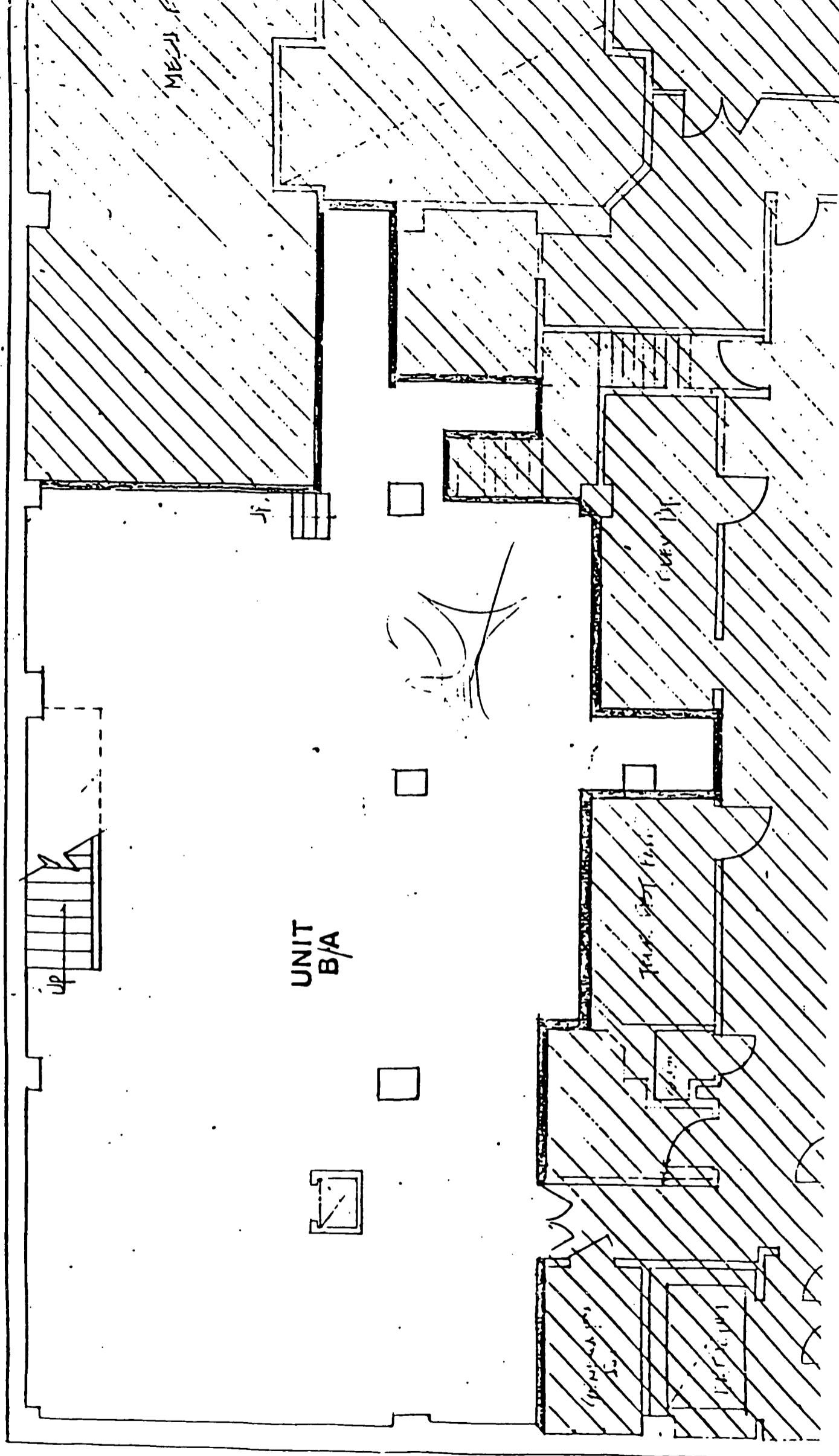
NEW YORK, N.Y.

AUG. 12, 1993: SCALE: 1/4" = 1'-0"



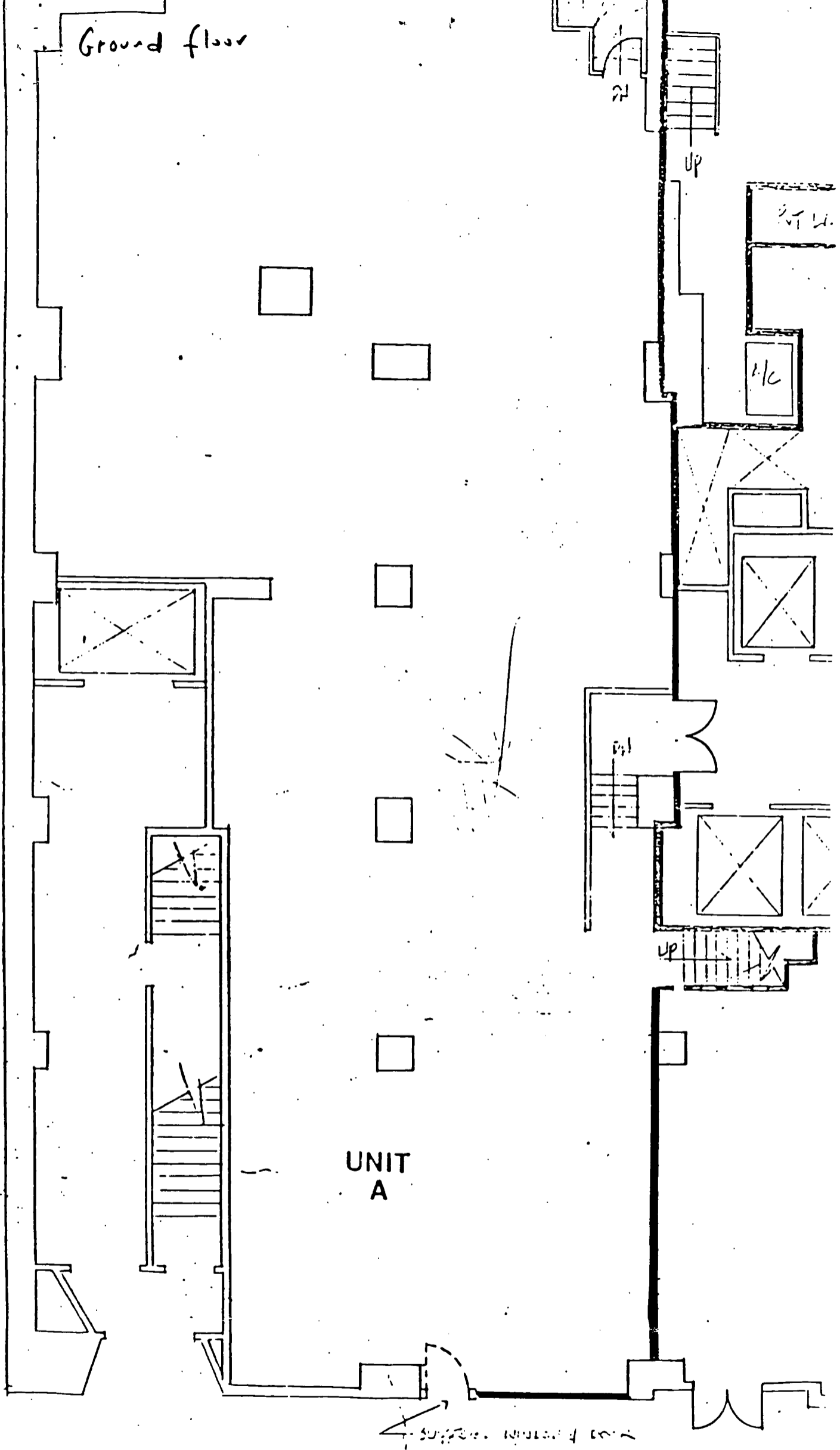


ALL DIMENSIONS ARE APPROXIMATE
NOT ACCORDING TO SCALE
FOR INFORMATION PURPOSES ONLY!



ALL DIMENSIONS ARE APPROXIMATE
NOT ACCORDING TO SCALE
FOR INFORMATION PURPOSES ONLY!

Ground floor



ALL DIMENSIONS ARE APPROXIMATE
NOT ACCORDING TO SCALE
FOR INFORMATION PURPOSES ONLY!

Ms. John Ramer, District Manager
Community Board # 5
118 East 28th Street
New York, New York 10016

Re: STARJEM RESTAURANTE INC.

Dear Ms. Ramer:

Please be advised that the above referenced has applied for a license to sell alcoholic beverages on premises at 485 Madison Avenue New York, New York.

This notice is being in compliance with the requirements of Section 64 subdivision 2a of the Alcoholic Beverage Control Law.

Very truly yours,

A handwritten signature, possibly reading "B.", is written in dark ink below the typed name.

P 387 106 738



**Receipt for
Certified Mail**

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Sent to	
Ms. Joan Rauer District Manager	
Street and	
Community Center	
118 East 28th Street	
P.O., State and ZIP Code	
N.Y. N.Y. 10016	
Postage	\$ 29
Certified Fee	1.00
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom Date, and Addressee's Address	
TOTAL Postage & Fees	40.00
Postmark or Date	

PS Form 3800, June 1991

**STICK POSTAGE STAMPS TO ARTICLE TO COVER FIRST CLASS POSTAGE,
CERTIFIED MAIL FEE, AND CHARGES FOR ANY SELECTED OPTIONAL SERVICES (see front).**

1. If you want this receipt postmarked, stick the gummed stub to the right of the return address leaving the receipt attached and present the article at a post office service window or hand it to your rural carrier (no extra charge).
2. If you do not want this receipt postmarked, stick the gummed stub to the right of the return address of the article, date, detach and retain the receipt, and mail the article.
3. If you want a return receipt, write the certified mail number and your name and address on return receipt card, Form 3811, and attach it to the front of the article by means of the gummed ends if space permits. Otherwise, affix to back of article. Endorse front of article **RETURN RECEIPT REQUESTED** adjacent to the number.
4. If you want delivery restricted to the addressee, or to an authorized agent of the addressee, endorse **RESTRICTED DELIVERY** on the front of the article.
5. Enter fees for the services requested in the appropriate spaces on the front of this receipt. If return receipt is requested, check the applicable blocks in item 1 of Form 3811.
6. Save this receipt and present it if you make inquiry.

☆ U.S. GPO: 1991-302-916

PS Form 3800, June 1991 (Reverse)

EXCISE BOND UNDERWRITERS

Bond Form L-9 Prescribed by
New York State Liquor Authority
November 1963

100 WILLIAM STREET • NEW YORK, N.Y. 10038

BOND IN SUPPORT OF APPLICATION FOR LICENSE OR
PERMIT UNDER THE NEW YORK ALCOHOLIC
BEVERAGE CONTROL LAW

LIQUOR

BOND EXPIRES IN

BOND NUMBER

001---11

-B09735---20

1996

Penal Sum of Bond

1,000.00

Plus Costs

KNOW ALL MEN BY THESE PRESENTS, that we,

Name of Applicant

Address of Place of Business

STARJEM RESTAURANT INC.

34 EAST 52ND STREET
A/K/A 485 MADISON AVENUE
NEW YORK NY 10022

In the county of NEW YORK

State of NEW YORK as Principal, and THE FIDELITY & CASUALTY CO OF NEW YORK

having an office and usual place of business at

180 MAIDEN LANE
NEW YORK

NY 10038

RECEIVED

a surety company approved by the Superintendent of Insurance of New York State as to solvency and responsibility and authorized to transact business in New York State, as Surety, are held and firmly bound unto the People of the State of New York to the penal sum set forth above and for the payment of any costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1000.00) for the payment of which sum or sums, well and truly to be made, we, the said principal and surety, bind ourselves, successors, and assigns, respectively, jointly and severally, firmly by these presents.

WHEREAS, the above bounden principal is making application to the New York State Liquor Authority for a license or permit under the Alcoholic Beverage Control Law and the said State Liquor Authority, by Part 81 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the Authority), having required the principal to file with it a bond to the People of the State of New York, as provided in said Law aforesaid,

NOW, THEREFORE, the conditions of this obligation are such that if the said license or permit applied for, which expires on the date designated in said license or permit, is granted to the said principal and the principal will not, during the license or permit period, suffer or permit any violation of the provisions of the Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or give cause, as provided in the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the State Liquor Authority), for the cancellation, revocation or suspension of said license or permit or the issuance of an order of warning, and will pay all fines and penalties which shall accrue thereunder, together with all costs taxed or allowed in any action or proceeding brought or instituted for a violation of any of the provisions of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or for cause for the cancellation, revocation or suspension or issuance of an order of warning as provided in the Alcoholic Beverage Control Law or Rules of the Authority, or costs taxed or allowed in any review pursuant to Section 121 of the Alcoholic Beverage Control Law; then this obligation shall be void; otherwise to remain in full force and effect; subject, however, to the conditions stated on reverse side.

IN WITNESS WHEREOF the parties hereto have caused these presents to be signed and sealed this _____ day of _____

Principal
BY: Marion Scott

LS. THE FIDELITY & CASUALTY CO OF NEW YORK

APPLICANT MUST SIGN HERE

John L. Conner
Attorney-in-fact

(OVER)

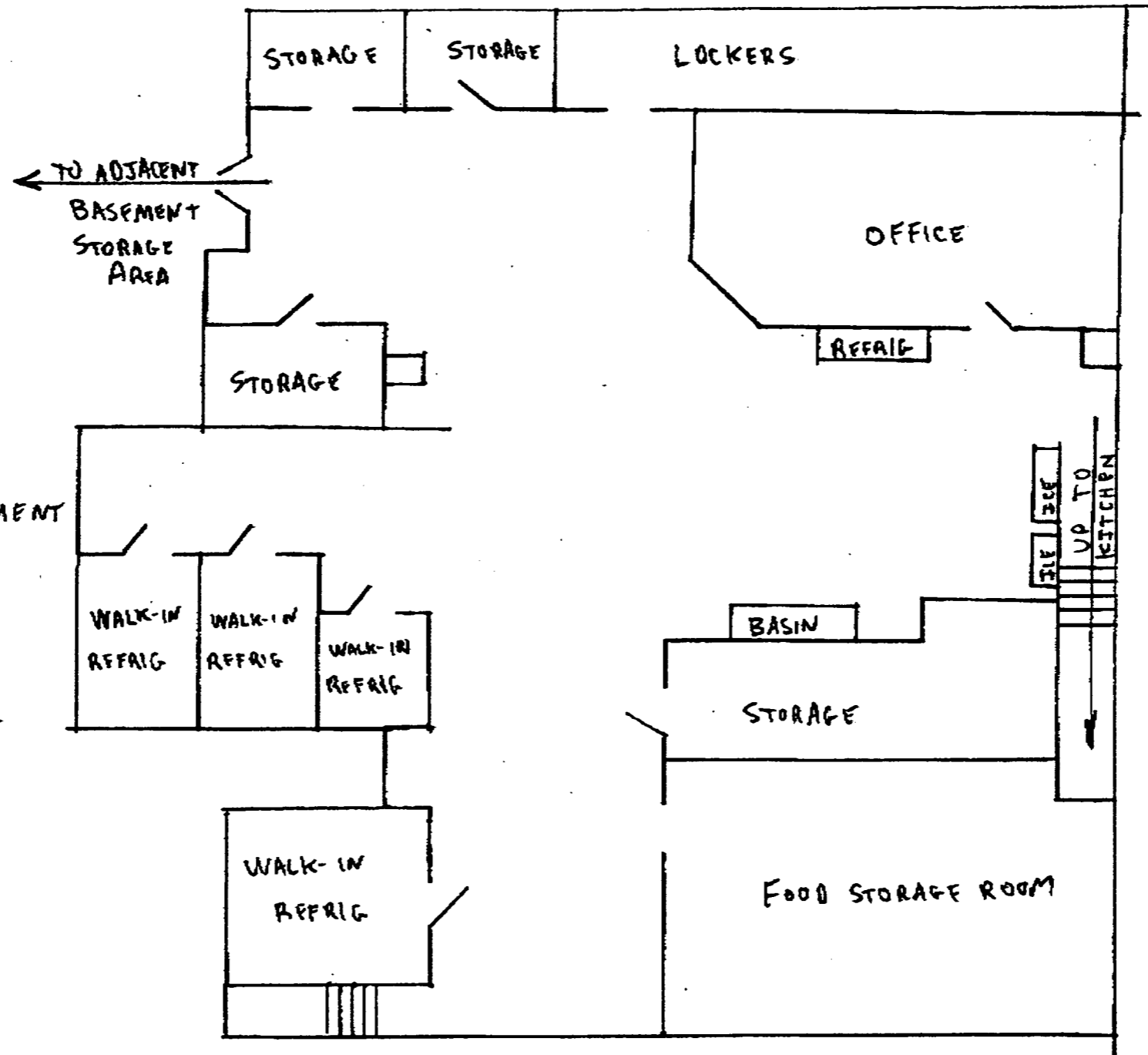
Bond Form L-9 Prescribed by the
New York State Liquor Authority
November 1963

BOND IN SUPPORT OF APPLICATION FOR LICENSE OR PERMIT
UNDER THE NEW YORK ALCOHOLIC BEVERAGE CONTROL LAW

CONDITIONS

1. An action for the breach of any condition of this bond may be maintained without previous conviction or prosecution for the violation of any provision of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by the State Liquor Authority, or for cause as provided by the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the Authority).
2. The aggregate liability of the surety on account of any and all defaults hereunder shall in no event exceed the penal sum of this bond plus costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1000.00).
3. Upon the payment of any loss arising under this bond, the surety shall be subrogated to the rights and remedies of the obligee against the principal to recover from the principal any amount so paid.
4. Any action brought for the penal sum of this bond shall be commenced within twenty-four months after the expiration of the license or permit period aforementioned, or for costs within one year after final disposition of any action or proceeding. In the event of the institution of any action or proceeding to review the Authority's determination, the period of 24 months shall not commence until the final determination of the proceeding or litigation.
5. This bond shall be effective during the time the aforementioned license or permit shall be in effect and during any extension thereof.
6. A breach of any condition of this bond shall be deemed to have been established by the revocation, cancellation or suspension of the aforesaid license or permit or the issuance of an order of warning by the State Liquor Authority unless said revocation, cancellation, suspension or order of warning shall have been reversed or annulled by a Court of competent jurisdiction.
7. In any action or proceeding to recover on this bond, the principal and the company named herein as Surety waive any defense based upon any defect in the bond, including, but not limited to, an erroneous, improper or defective insertion or omission to insert or apparent alteration of the expiration year and/or amount of the penal sum of the bond and further waive any objection that the bond bears a printed, typewritten or facsimile signature. Any bond filed with the State Liquor Authority shall be admissible in evidence in any court on application of the State Liquor Authority or People of the State of New York without further proof of due execution thereof by or on behalf of the principal and surety and shall be conclusively presumed to have been duly executed by and on behalf of the principal and surety. Any bond filed with the State Liquor Authority and bearing the printed or facsimile name of the surety or the typewritten or facsimile signature of its representative shall be conclusively presumed to be the duly issued bond of the surety company and binding on it, its successors and assigns for the amount specified in Part 81 of Subtitle B of Title 9 of the Official Compilation of Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the State Liquor Authority).

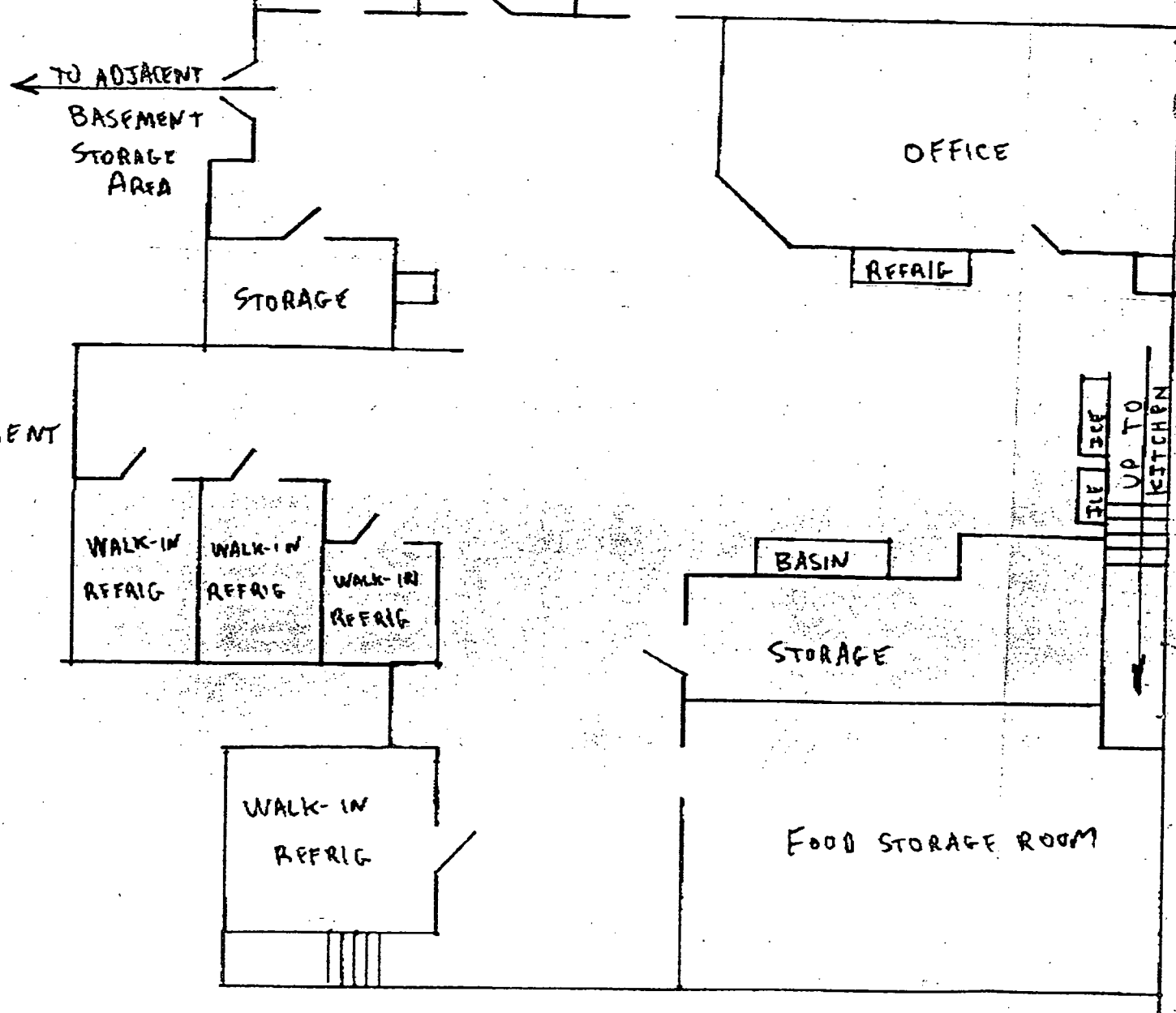
2-13-67 JON 12-1-12-1



INTERIOR DIAGRAM-BASEMENT
34 EAST 52ND STREET
NEW YORK, N. Y.
AUG. 12, 1993:
-NOT TO SCALE-

Basement

INTERIOR DIAGRAM-BASEMENT
34 EAST 52 ND STREET
NEW YORK, N. Y.
AUG. 12, 1993:
-NOT TO SCALE-

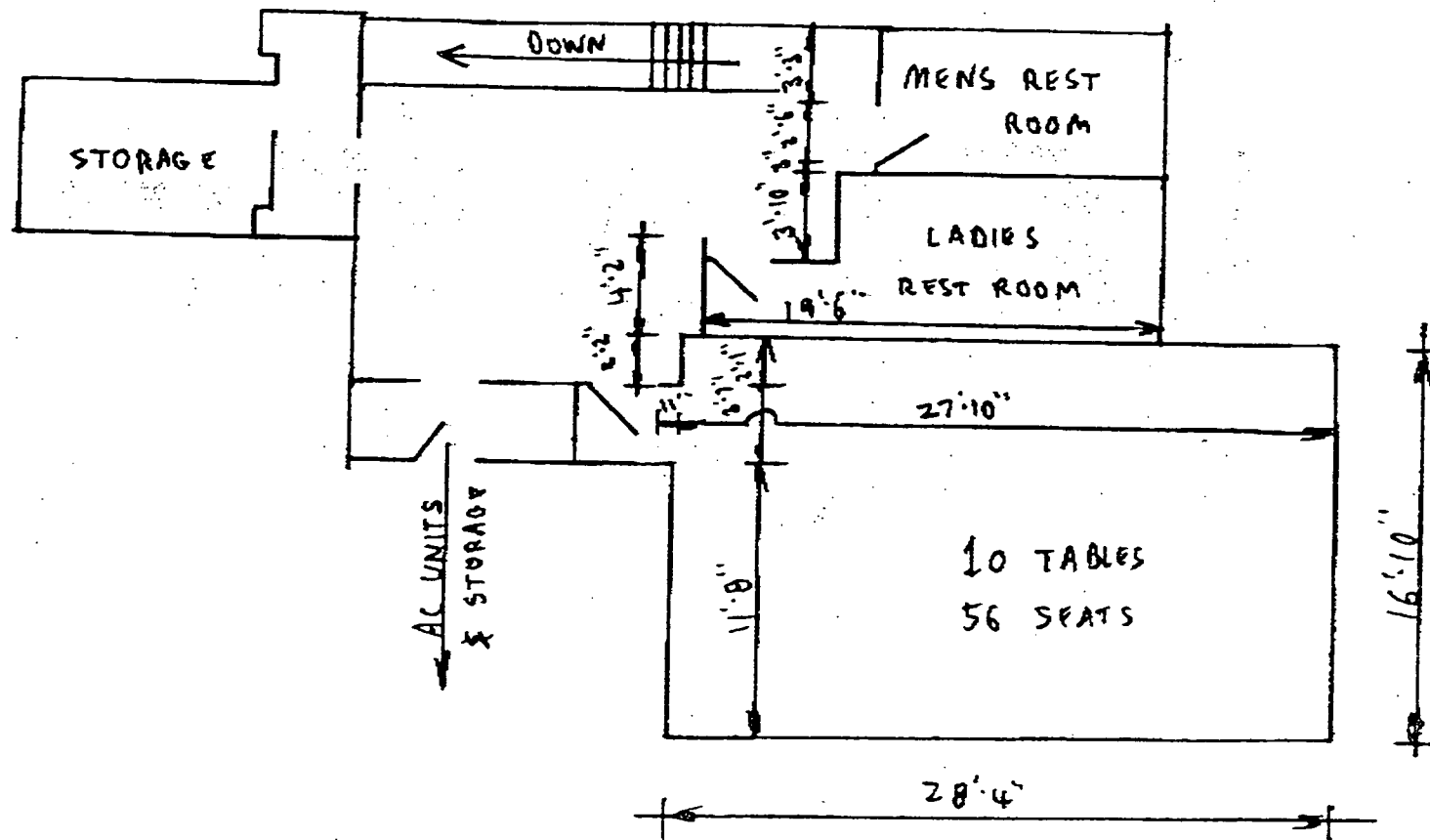






2ND FLOOR

ET

$$E: 1/8'' = 1' \cdot 0''$$


1st
Floor

INTERIOR DIAGRAM PROPOSED

34 EAST 52ND STREET

NEW YORK, N.Y.

AUG. 12, 1993: SCALE: 1/8" = 1'-0"

18'-4"

16'-3"

25'-6"

4'-0"

6'-0"

10 TABLES
18 SEATS

REFRIG UNITS

-KITCHEN AREA-
-NOT TO SCALE-

COOKING AREA

BASIN

REFRIG

DOWN

32 TABLES
122 SEATS

3'-6"

21'-5"

1'-11"

6'-11"

1'-5"

16'-0"

COAT
ROOM

PHONE

UP

UP

5'-5"

29'-9"

BANK

WATCHES-
JEWELRY

- MADISON AVENUE -

SKIN & HAIR
PRODUCTS

DELI- SALAD BAR

APPLICANT

COMPUTER
SOFTWARE

OFFICE
BUILDING

OPTICAL

BUILDING
SERVICE ENTRANCE

OFFICE BUILDING

SPACE
FOR
RENT

- EAST 52ND STREET -

OPTICIANS

PHARMACY-
VARIETY

OFFICE
BUILDING

MENS
CLOTHING

OFFICE
BUILDING

BANK

AREA SURVEY
34 EAST 52ND STREET
NEW YORK, N.Y.
AUG. 12, 1993 - NOT TO SCALE -

- PARK AVENUE -

BANK

OFFICE
BUILDING

(c) Describe all bars (length, shape and location):

Floor; circular shape;
approximately 18 feet in length

(d) Any food counters?

NO X YES

(e) If so, describe:

1st Floor in Rear

Kitchen

5.(a) Location and size of kitchen, if any:

(b) Is food available for sale?

NO YES X

(c) If so, describe type of food?

Upscale cuisine

(d) Is a chef employed?

NO YES X

(e) What other kitchen help is employed?

Dishwashers, assistant cooks,
waiters + waitresses.

Permits

6.(a) Has premises been issued a Board of Health permit?

NO YES PENDING

(b) Do premises have a sidewalk cafe?

NO X YES

(c) Has permit^o been obtained?

NO YES N/A

(d) Any pool tables?

NO X YES

(e) If so, provide dimensions?

NO YES

(f) Names of Vendors:

Unavailable at this
time

Hotel

7.(a) Type of Hotel:

Transient
Apartment
Summer

N/A

NO YES

(b) Is building used solely as a Hotel?

(c) How many floors?

(d) How many rooms?

(e) Describe dining room facilities:

N/A
N/A
N/A

SECTION G

PROPOSED METHOD OF OPERATION

All applicants for a license to sell alcoholic beverage for consumption on-premises must complete Section G.

1.) What type of establishment will this be?
(e.g. restaurant, tavern, disco, etc.)

RESTAURANTE

2.) Will premises have live music?

NO X YES

3.) Will premises permit dancing?

NO X YES

4.) Will premises have other kinds of entertainment?

NO X YES

If YES, describe:

5.) What are the proposed hours of operation?

NOON - 2:00 A.M.

6.) Will the applicant principals leave their present employment?

YES

7.) Will the applicant devote full or part-time to the applied for premises?

Full-time X
Part-time

8.) Will the business employ a Manager?

NO X YES

9.) Name(s) of Manager(s):

10.) How many employees? (Describe positions)

12 total - cook, assistant
cook, waiters, dishwashers,
coat person.

11.) Will there be security personnel?

NO X YES

If YES, how many?

20.) Do you or did you have a family, business or social relationship with the landlord, tenant or last licensee of the premises to be licensed?

NO X YES

21.) FINANCES

State TOTAL AMOUNT OF MONEY you are providing the applicant \$ 470,000.

Type of Investment (Investment/Loan/Contract-debt)	\$Amount	Source of Funds (Accounts, Loans, Gifts, Asset Sales, etc.) (enter identification numbers for accounts)
INVESTMENT	\$ 470,000.	HOME EQUITY LOAN ON 8220 11th AVENUE BROOKLYN FROM HAMILTON FEDERAL SAVINGS BANK AT 9201 4th AVENUE BROOKLYN, NEW YORK

IMPORTANT - Submit any and all records, documents and affidavits that you feel may assist you in explaining the source of monies you will provide the applicant.

EXAMPLES OF DOCUMENTS TO SUBMIT: A. Loan or gift letter. B. Copy of bank or stock account from which funds will be loaned or gifted. From these accounts, copy of name page and all pages going back one year. Circle or highlight unusual deposits and explain. If funds were transferred from another account or previous bank book(s), copy the name page and all pages going back one year for that book.

If you are guaranteeing a loan as a co-signer or putting up something of value as collateral.

Identify Co-Signer or Collateral Identify Loan/ Describe Collateral

I understand that the information I submit will be relied upon by the State Liquor Authority and a false statement or misrepresentation will constitute cause for the disapproval of the application or revocation of any license for which this application is submitted.

I verify that statements made herein are true and if any change occurs prior to the receipt of the license, I will notify the Authority by registered or certified mail within 48 hours or if change occurs after receipt of the license, I will notify the Authority similarly within 10 days. I understand that failure to give the required notice will violate the Alcoholic Beverage Control Law and may result in revocation of the license.

Maren Scott

Signature

8/19/93

Date

13(a) Has a license or permit listed above been REVOKED, CANCELLED or otherwise Involuntarily Terminated?

NO X YES

(b) If YES, state action and date of action:

14(a) Will you take an active part in the operation of the business to be licensed?

NO YES X

(b) If YES, explain nature of activity:

RESTAURANT & BAR MANAGER

15(a) Are you a police commissioner, other police official, subordinate of any police department, a Sheriff, Deputy, Under-Sheriff or any Peace Officer?

NO X YES

(b) If YES, provide details:

16(a) Have you ever been CONVICTED (including pleas of guilty or suspended sentences) of any felony, misdemeanor (including driving while intoxicated or impaired) or any other type of offense EXCEPT MINOR TRAFFIC INFRACTIONS?

NO X YES

(b) If YES, attach a Certificate of Disposition by the court clerk for each case and a Certificate of Relief from disabilities if available and submit an affidavit explaining all details. If you have reported all convictions to this authority and were subsequently approved for a license, check here --

Approved

17(a) Are there any ARRESTS, INDICTMENTS or SUMMONSES other than minor traffic infractions PENDING against you (including driving while intoxicated or impaired)?

NO X YES

(b) If YES, provide copy of accusatory instrument.

18.) If you are an applicant (i.e. proprietor, partner, or stockholder), would any of the above questions require a YES answer if asked of your spouse?

NO X YES
NOT an applicant

19.) If you answered YES to the above question or if your spouse will aid in the management of the applicant business, check here and your spouse must complete a personal questionnaire.

Spouse will complete questionnaire;

9.) Position (or interest) you will hold in the license application (Check each):

President	<u>X</u>	Management Agent	___	Broker	___
V. President	___	Landlord	___	Vendor	___
Secretary	___	Stockholder	___	Contractor	___
Treasurer	___	Partner	___	Franchisor	___
Chairman	___	General Partner	___	Guarantor	___
Officer	___	Limited Partner	___	Donor	___
Director	___	Sole Proprietor	___	Lender	___
Manager	<u>X</u>	OTHER:	_____		

10(a) If you are an Applicant (i.e., proprietor, partner, or stockholder) or Applicant's spouse, will you continue your present occupation or business? NO X YES ___
Not Applicable ___

(b) If Yes, list hours you will devote to business sought to be licensed: _____

11(a) Do you have any interest, direct or indirect, in any premises or business where any alcoholic beverage is manufactured, transported or sold at wholesale or retail, whether by stock ownership, interlocking directors, mortgage or lien on, or ownership of any real or personal property, or by any other means including loans? NO X YES ___

(b) If Yes, provide information below:

Business Name	Type of Business	Your Interest (Date began)	Business Address	Liquor License	Federal ID No.

12(a) Other than as itemized in the above, have you ever applied anywhere for a license or permit to traffic in alcoholic beverages, including any application as a partnership or corporation in which you are/were a principal? NO X YES ___

(b) If YES, provide information below:

Name of applicant/	Address of premises	State	Date of filing	License No.	Disposition

PERSONAL QUESTIONNAIRE

- A. All principals to the license application must complete this questionnaire in full.
 B. Make duplicate blank forms as necessary.
 C. Answer all questions below and check the appropriate spaces.
 D. Attach additional sheets if more space is needed.

1.) **APPLICANT NAME** STARJEM RESTAURANT, INC.

Premises Address 485 MADISON AVENUE

County NEW YORK

2.) **YOUR NAME** MARION SCOTTO

Address [REDACTED]

Social Security No. [REDACTED]

Date of Birth [REDACTED]

Telephone No. [REDACTED]

3.) List any other name or names you have been known by
 (including maiden name) and the reason for changing your
 name: _____

4.) Height 5'4" Weight 135 lbs Marital Status MARRIED
 Sex F Hair Color BLOND

5.) U.S. Citizen? _____ NO YES X
 Country of Birth: USA
 If Alien, state Registration No. or Visa Type: _____

6.) Former Residences for past ten years:

Address

FROM (mo./yr.) TO (mo./yr.)

[REDACTED]

7.) Your Occupation record for the past ten years:

FROM/TO (mo./yr.)	Employer	Type of Business	Address	Occupation
1/87 - 1992	VIP CELEBRATION PARTY PLANNERS	8220 11th AVENUE	PARTY PLANNER	
		BRROKLYN, NEW YORK 11222		
Prior to 1987 Applicant was HOUSEWIFE				

8.) **NAME OF SPOUSE** ANTHONY SCOTTO

Address [REDACTED]

Social Security No. [REDACTED]

Telephone No. [REDACTED]

November 12, 1993

MRS. MARION SCOTTO
8220 11TH AVENUE
BROOKLYN, NY 11228

RE: NEW YORK OP 6650
STARJEM RESTAURANT, INC.
34 EAST 52ND STREET
AKA 485 MADISON AVENUE
NEW YORK, NY 10022

APPROVAL EXPIRATION
DATE: JANUARY 1, 1994

DEAR MADAM:

The Members of the Authority at their regular meeting held on approved NOVEMBER 10, 1993 your application for an ON PREMISES LIQUOR LICENSE subject to submission by you of an affidavit to our LICENSE PROCESSING UNIT, 250 Broadway, New York, NY 10007, 16th floor, indicating compliance with the following conditions:

1. That premises are constructed and equipped in accordance with the plans and specifications as approved by the Liquor Authority.
2. That the premises will be provisioned, staffed and conducted in accordance with the plan of management and/or method of operation submitted with the application to the Liquor Authority.
3. That the financing of the business, including the construction of the proposed premises is in accordance with information supplied in support of the application to the Liquor Authority.
4. That the premises have been completed and are ready to be opened and operated by the applicant.

- continued -

NEW YORK OP 6250
STARJEN RESTAURANT, INC. ,

November 12, 1993

- 2 -

5. Subject to submission of SLA FORM 180-12, in duplicate, if you are an employer of one or more employees or a corporation.

This letter of approval shall be void if you do not comply with the conditions contained in this letter prior to the expiration date set forth above. If you cannot comply within the time allowed, you may seek an extension of time. Instructions for making application for an extension of this letter of approval are enclosed herewith.

Very truly yours,

STATE LIQUOR AUTHORITY

BJL:jdb

BARBARA JOANNI LORD
SECRETARY TO THE AUTHORITY

ENCLS.

CC: GUY T. PARISI, ESQ.
112 WOODS END ROAD
CHAPPAQUA, NY 10514

NEW YORK STATE LIQUOR AUTHORITY
FULL BOARD AGENDA
WEEK OF NOVEMBER 8, 1993
REFERRED FROM: LICENSING BOARD

93-2250(A)

REASON FOR REFERRAL

NEW YORK OP 6650
STARJEM RESTAURANT, INC.
34 EAST 52nd STREET
485 MADISON AVENUE
NEW YORK, NY 10022

FOR DIRECTION

FILED: 9/7/93

LOCAL BOARD APPROVED: 9/30/93

(NEW)

The Members of the Authority at their regular meeting held at the Zone I New York Office on November 10, 1993 determined:

Application approved.

Chairman Duffy, Comms. Doyle, Cuomo, Tillman and Gedda present and voting for the above.

1-2-3-4-5

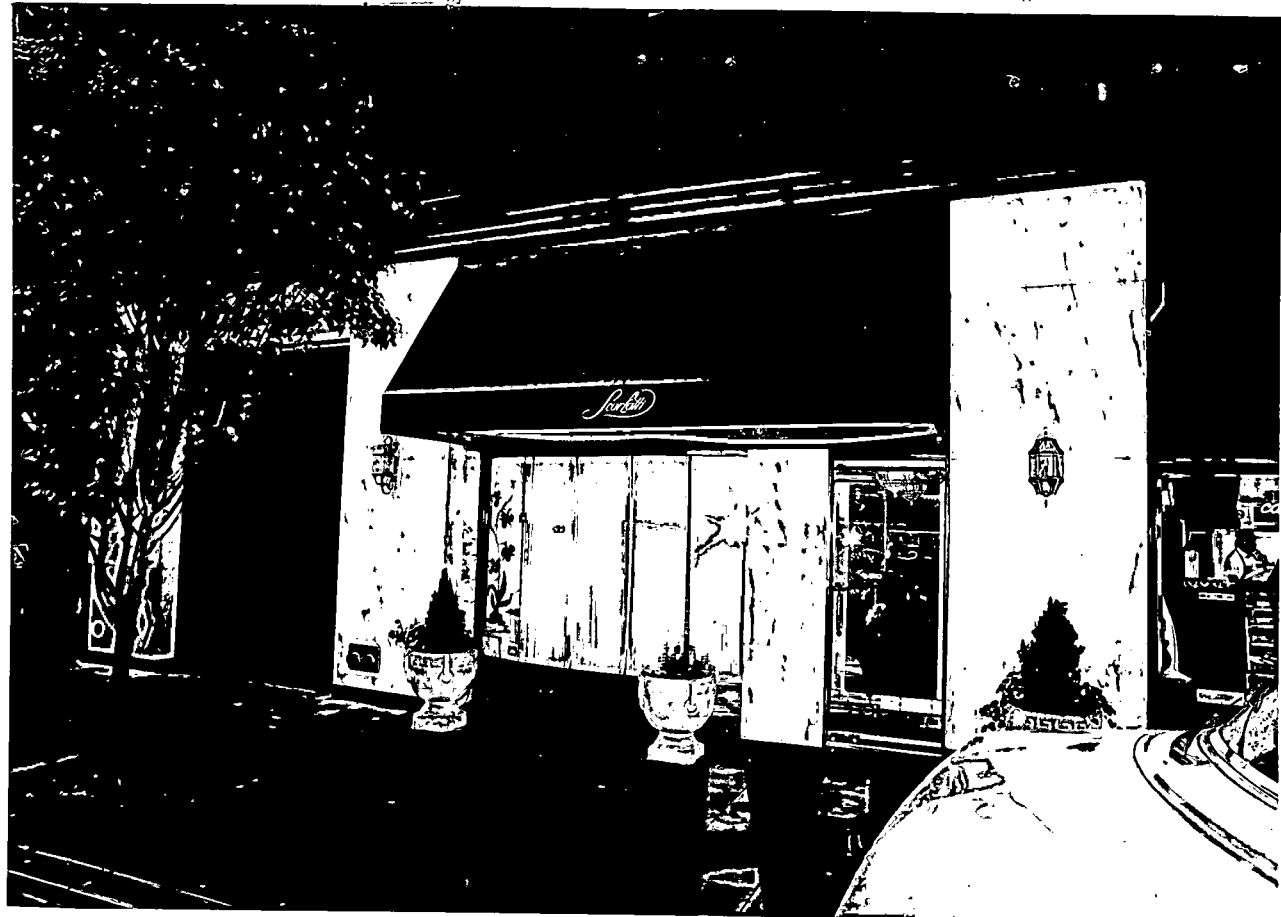
BJL:smc

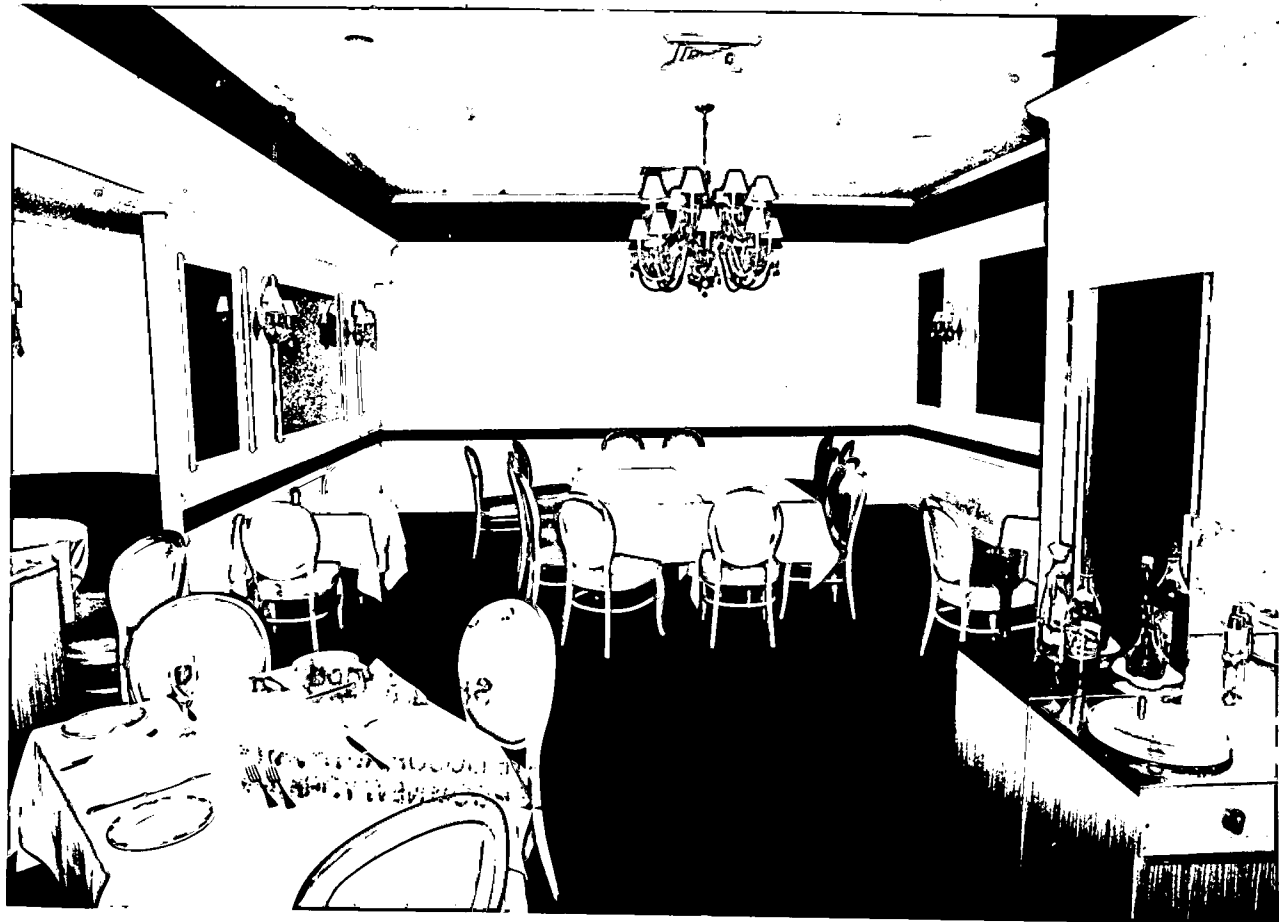
FILE COPY
DO NOT REMOVE

Barbara Jeanne Lord

SECRETARY TO THE AUTHORITY

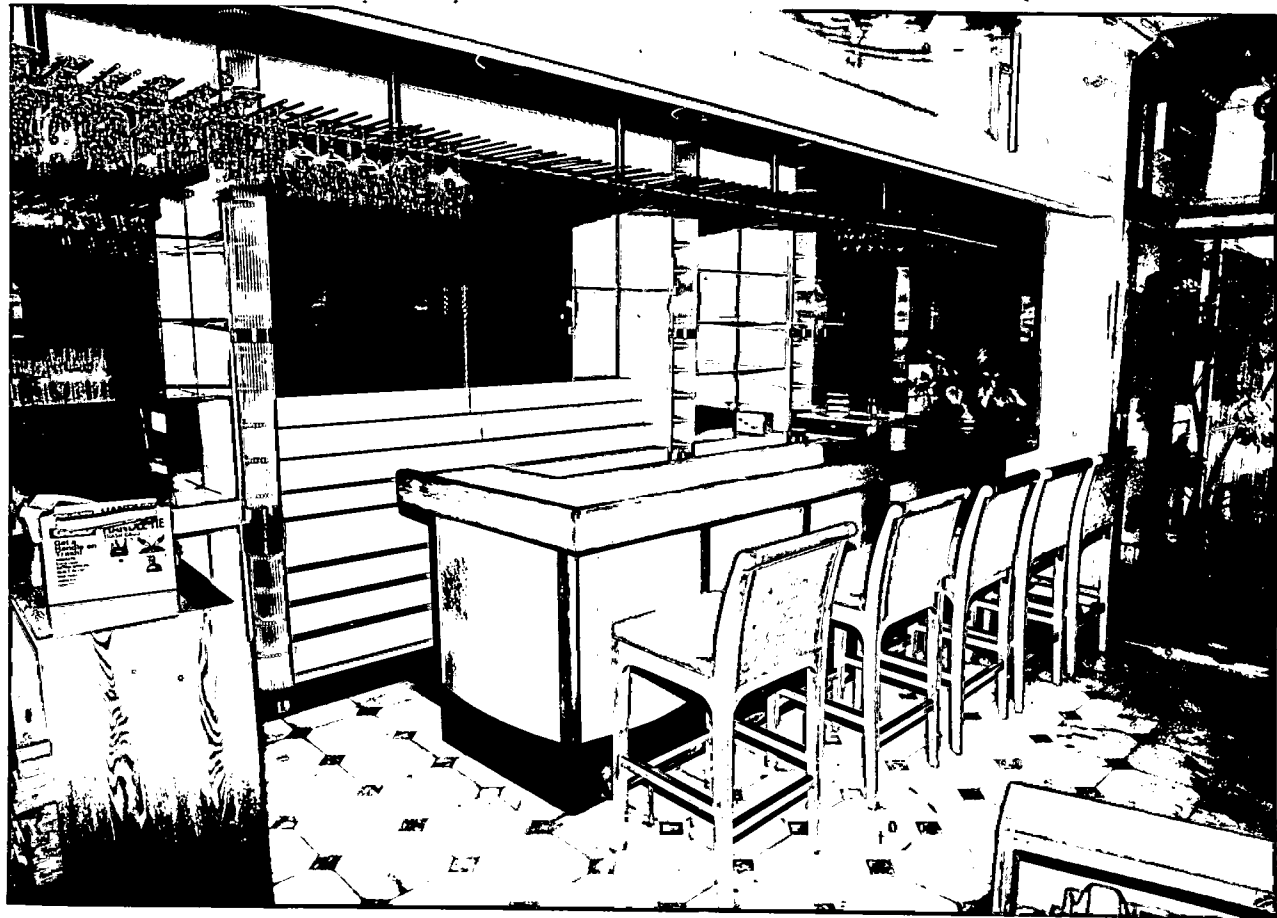
*L-1 to res
was atty
exp dated 1/1/94
1, 2, 3, 4, 6
+ come para*











LOCAL BOARD COPY

STATE OF NEW YORK LIQUOR AUTHORITY

11 Park Place, NY, NY 10007
2nd floor, A-wing, 84 Holland Ave., Albany, N.Y. 12208
125 Main Street, Buffalo, N.Y. 14203

RENEWAL APPLICATION RETAIL LIQUOR OR WINE LICENSE

The Original and Local Board Copy of this application must be properly executed and signed and mailed in the enclosed return envelope and must be accompanied by the following:
(1) CERTIFIED CHECK, BANK OFFICERS' CHECK or DRAFT, or MONEY ORDER for the required fee payable to the order of the State Liquor Authority.
(2) REQUIRED BOND, issued by any surety company authorized to execute such bonds in the State of New York. Such bond must be completely filled out, signed and dated by both the surety company and the licensee, and must be an original document.
(3) Such other documents as required by reason of answers made to questions in this application and/or set forth in instruction Form 260-007 or 260-009.

ALL QUESTIONS MUST BE ANSWERED IN BOXES BELOW. (See Instructions on enclosed Form 260-007 or 260-009.)

Any false answer or statement made by the applicant constitutes perjury and will subject any license issued hereunder to revocation.

The applicant hereby applies for a renewal of RETAIL LIQUOR or WINE license now held by applicant.

Full name of applicant. (If partnership, name all partners)		Trade name or other names under which applicant does business	Premises Telephone No.
STARJEM RESTAURANT, INC.		FRESCO	212-935-3434
Street address of premises to be licensed		Post office address of premises (if different)	
34 EAST 52ND STREET a/k/a 485 MADISON AVENUE			
City, town or village,—Zip Code	County	City, town or village,—Zip Code (if different)	
NEW YORK, NEW YORK 10022	NEW YORK		
Name of owner of building in which the premises to be licensed are located		Landlords Telephone No.	Address of owner of building
JACK RESNICK & SONS		212-421-1300	110 EAST 59TH STREET, NY, NY 10022

1. IF ANY CHANGES IN FACTS HAVE OCCURRED SINCE THE SIGNING OF THE APPLICATION FOR YOUR CURRENTLY HELD LICENSE WHICH HAVE NOT BEEN REPORTED TO AND ACKNOWLEDGED BY THE STATE LIQUOR AUTHORITY, ANSWER "YES" IN BOX #1 AND SET FORTH DETAILS OF CHANGES IN FACTS IN THE APPROPRIATE SCHEDULES A AND/OR B BELOW. IF NO CHANGES IN FACTS HAVE OCCURRED, ANSWER "NO" IN BOX #1.

1. Yes or No

NO

Use this schedule "A" to set forth details of arrests, summonses and/or convictions which have occurred since the signing of the application for the currently held license and have not been reported to the Authority or having been reported had not been acknowledged by the Authority.

Name of Defendant	Connection with business (Licensee, employee, patron or other)	Crime or Offense	Date	Disposition in each case

Use this schedule, "B" to set forth details of an outstanding loans and/or such "changes" (other than arrests, etc.) which had not been reported to the Authority or having been reported, had not been acknowledged by the Authority. (See instruction Form 260-007 or 260-009.) (If more space is needed attach rider.)

Nature of Change	Date	Details

If change is in corp. setup, please indicate if anyone not presently a principal is involved.

2. (a) State whether said licensed business presently is regularly kept open and operated by the applicant.

2. (a) YES

- (b) If not, indicate date premises were closed, and

Date Closed

- (c) State whether license certificate is deposited in safekeeping with the appropriate Local A.B.C. Board.

Yes or No

(c)

3. (a) Did anyone assist you in preparing this application?

Yes or No

3. (a) YES

- (b) If so, give name, address and business of each such person.

Name, address, business and phone

Warren B. Pesetsky, Esq.

- (c) Date this application was mailed to State Liquor Authority.
IT IS NOT NECESSARY FOR YOU TO EMPLOY ANY PERSON, AGENCY OR ORGANIZATION TO ASSIST YOU IN FILING THIS APPLICATION. BEWARE OF PERSONS CLAIMING TO BE ABLE TO ASSIST YOU IN SECURING ACTION ON YOUR APPLICATION.

Pesetsky & Bookman

325 Broadway, Suite 501

New York, NY 10007

212 513 1988

APPLICANT UNDERSTANDS THAT ANY CHANGE IN ANY OF THE FACTS REPORTED HEREIN WHICH OCCURS BETWEEN THE SIGNING OF THIS APPLICATION AND THE COMMENCEMENT OF THE NEW LICENSE PERIOD MUST BE REPORTED TO THE AUTHORITY IN WRITING BY CERTIFIED OR REGISTERED MAIL WITHIN 48 HOURS. ANY CHANGE OF FACTS OCCURRING AFTER THE COMMENCEMENT OF THE NEW LICENSE PERIOD MUST BE REPORTED WITHIN 10 DAYS. THE FAILURE TO COMPLY WITH THE FOREGOING IS A GROUND FOR THE REVOCATION, CANCELLATION OR SUSPENSION OF THE LICENSE.

APPLICANT HEREBY AGREES THAT ANY APPLICATION FILED UNDER THE ALCOHOLIC BEVERAGE CONTROL LAW BY ANY PERSON HAVING ANY INTEREST, DIRECT OR INDIRECT, EITHER IN THE PREMISES OR IN THE BUSINESS TO BE LICENSED, FOR ANY LICENSE OR PERMIT, SHALL BE DEEMED AND MADE A PART HEREOF AND CONSIDERED BY THE STATE LIQUOR AUTHORITY IN ACTING UPON THIS APPLICATION.

THIS CERTIFICATION MUST BE SIGNED AND DATED by INDIVIDUAL APPLICANT and EACH MEMBER of PARTNERSHIP

The undersigned, each for himself, certifies that he is the applicant above named; that he knows the contents of the above application and the statements contained therein, that the same are true of his own knowledge, that he has complied and will continue to comply with all conditions upon which the original license was issued; that no physical changes have been made to the licensed premises since the issuance of the original license, except those authorized by the State Liquor Authority; and represents that all statements made in the original application for this license and in any and all applications for renewal thereof are true and correct, except as modified in subsequent renewal applications or as otherwise reported to and acknowledged or approved by the Authority.

Dated _____

(Signature of applicant or of each partner)

(Residence)

(Home Phone)

THIS CERTIFICATION TO BE SIGNED AND DATED BY A CORPORATION

Marion Scotto

certifies that he is

President

(Title)

of the above named applicant corporation; that he knows the contents of the above application and the statements and answers therein, that the same are true of his own knowledge; that he has been authorized by order of the Board of Directors of said applicant corporation to make the statements and answers in this application in behalf of said applicant corporation with the same force and effect as if said corporation made such statements and answers itself; that it has complied and will continue to comply with all conditions upon which the original license was issued; that no physical changes have been made to the licensed premises since the issuance of the original license, except those authorized by the State Liquor Authority; and represents that all statements made in the original application for this license and in any and all applications for renewal thereof are true and correct, except as modified in subsequent renewal applications or as otherwise reported to and acknowledged or approved by the Authority.

Dated _____

Marion Scotto
(Signature of authorized officer)

350 East 72nd Street, NY, NY 10021

(Residence)

212-472-4466
(Home Phone)

NOTE:

ALL QUESTIONS MUST BE ANSWERED ON ALL COPIES, NO CARBON HAS BEEN PROVIDED.

Renewal Application for
RETAIL LIQUOR OR WINE LICENSE

(Entry to be made by State Liquor Authority)

11 Park Place, NY, NY 10007

2nd floor, A-wing, 84 Holland Ave., Albany, N.Y. 12208

125 Main Street, Buffalo, N.Y. 14203

ENDORSEMENT or DUPLICATE

Zone County Serial Class Deposit Date Slip No.

Fee \$ _____ Audited by _____

Endorsement Cert. _____

Dup. Cert. No. _____ Date _____

Approved by _____

ENTRY RECORD

Zone County Serial Class Deposit Date Slip No.

Fee \$ _____ Audited by _____

APPLICATION APPROVED

DATE _____

S.L.A. By _____

STARJEM RESTAURANT INC

34 E 52ND STREET

AKA 485 MADISON AVENUE

NEW YORK

NY 10022

OP 06650

NEW

11/01/96

NOTICE: FEES HAVE INCREASED

5,190.00

X

FEE

99 1 NEW OP 06650 25

Credit
Period
Group #

Certificate
Number

Write these numbers
on your check

License
Class Code

Zone
Office

06650 252

252

1

**NEW YORK STATE LIQUOR AUTHORITY
NOTIFICATION RIDER TO RENEWAL APPLICATION**

COMPLETE AND RETURN WITH RENEWAL APPLICATION

You are required by the Alcoholic Beverage Control Law (Section 64 and 109) to promptly notify by letter the Clerk of the village, town or city (community board in New York City) in which your premises is located of your intention to renew your license. The notification must be sent by certified mail, return receipt requested, when you receive your renewal application forms.

Attached below is a Certification Rider which, when promptly completed and returned to the SLA with your renewal application, demonstrates that you have notified the clerk or community board in accordance with legal requirements.

You must keep the certified mail receipt for your records.

Print your license number on the appropriate line on the Certification Rider. Your license number is located on the bottom right hand corner of the renewal application. It consists of numbers and letters such as:

88 1 QUEE EB 92345 141

DO NOT MAIL THE CERTIFICATION RIDER TO THE COUNTY CLERK

NEW YORK CITY LICENSEES ONLY

New York City renewal applicants must file their intent to renew with the local community board. If you are unsure of which community board serves the area in which your premises is located, call the number listed below for the office of your Borough President:

MANHATTAN

212-669-8300

BRONX

718-590-3561

QUEENS

718-520-3280

STATEN ISLAND

718-390-5122

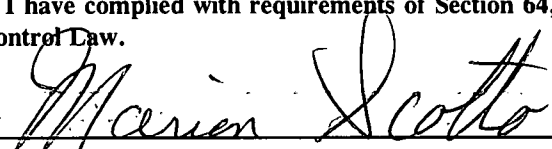
BROOKLYN

718-802-3700

CERTIFICATION RIDER TO RENEWAL APPLICATIONS

(To be returned with your renewal application.)

I hereby certify that I have complied with requirements of Section 64, Subd. 2-A and Section 109, Subd. 2, of the Alcoholic Beverage Control Law.



SIGNATURE OF APPLICANT, TITLE

NY OP 6650

LICENSE NUMBER

STARJEM RESTAURANT, INC.

NAME OF LICENSEE

34 EAST 52ND STREET a/k/a 485 MADISON AVENUE, NEW YORK, NEW YORK 10022

ADDRESS OF LICENSED PREMISES

EXCISE BOND UNDERWRITERS

Bond Form L-9 Prescribed by
New York State Liquor Authority
November 1963

100 WILLIAM STREET • NEW YORK, N.Y. 10038

BOND IN SUPPORT OF APPLICATION FOR LICENSE OR
PERMIT UNDER THE NEW YORK ALCOHOLIC
BEVERAGE CONTROL LAW

LIQUOR

001--08

--B09735--20

BOND EXPIRES IN

OCTOBER, 1999

BOND NUMBER

Penal Sum of Bond

1,000.00 Plus Costs

KNOW ALL MEN BY THESE PRESENTS, that we,

Name of Applicant

STARJEM RESTAURANT INC.

Address of Place of Business

34 EAST 52ND STREET
A/K/A 485 MADISON AVENUE
NEW YORK NY 10022

In the county of NEW YORK State of NEW YORK as Principal, and CONTINENTAL CASUALTY CO.
having an office and usual place of business at 100 CHURCH ST.
NEW YORK NY 10007

a surety company approved by the Superintendent of Insurance of New York State as to solvency and responsibility and authorized to transact business in New York State, as Surety, are held and firmly bound unto the People of the State of New York in the penal sum set forth above and for the payment of any costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1,000.00) for the payment of which sum or sums, well and truly to be made, we, the said principal and surety, bind ourselves, successors, and assigns, respectively, jointly and severally, firmly by these presents.

WHEREAS, the above bounden principal is making application to the New York State Liquor Authority, for a license or permit under the Alcoholic Beverage Control Law and the said State Liquor Authority, by Part 81 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the Authority), having required the principal to file with it a bond to the People of the State of New York, as provided in said Law aforesaid.

NOW, THEREFORE, the conditions of this obligation are such that if the said license or permit applied for, which expires on the date designated in said license or permit, is granted to the said principal and the principal will not, during the license or permit period, suffer or permit any violation of the provisions of the Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or give cause as provided in the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the State Liquor Authority), for the cancellation, revocation or suspension of said license or permit or the issuance of an order of warning, and will pay all fines and penalties which shall accrue thereunder, together with all costs taxed or allowed in any action or proceeding brought or instituted for a violation of any of the provisions of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or for cause for the cancellation, revocation or suspension or issuance of an order of warning as provided in the Alcoholic Beverage Control Law or Rules of the Authority, or costs taxed or allowed in any review pursuant to Section 121 of the Alcoholic Beverage Control Law; then this obligation shall be void; otherwise to remain in full force and effect; subject, however, to the conditions stated on reverse side.

IN WITNESS WHEREOF the parties hereto have caused these presents to be signed and sealed this _____ day of _____

Principal
BY: Marion Scott L.S.

CONTINENTAL CASUALTY CO.

↑
APPLICANT MUST SIGN HERE

John L. Corneau
Attorney-in-fact

(OVER)

BOND IN SUPPORT OF APPLICATION FOR LICENSE OR PERMIT
UNDER THE NEW YORK ALCOHOLIC BEVERAGE CONTROL LAW

CONDITIONS

1. An action for the breach of any condition of this bond may be maintained without previous conviction or prosecution for the violation of any provision of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by the State Liquor Authority, or for cause as provided by the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the Authority).
2. The aggregate liability of the surety on account of any and all defaults hereunder shall in no event exceed the penal sum of this bond plus costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1000.00).
3. Upon the payment of any loss arising under this bond, the surety shall be subrogated to the rights and remedies of the obligee against the principal to recover from the principal any amount so paid.
4. Any action brought for the penal sum of this bond shall be commenced within twenty-four months after the expiration of the license or permit period aforementioned, or for costs within one year after final disposition of any action or proceeding. In the event of the institution of any action or proceeding to review the Authority's determination, the period of 24 months shall not commence until the final determination of the proceeding or litigation.
5. This bond shall be effective during the time the aforementioned license or permit shall be in effect and during any extension thereof.
6. A breach of any condition of this bond shall be deemed to have been established by the revocation, cancellation or suspension of the aforesaid license or permit or the issuance of an order of warning by the State Liquor Authority unless said revocation, cancellation, suspension or order of warning shall have been reversed or annulled by a Court of competent jurisdiction.
7. In any action or proceeding to recover on this bond, the principal and the company named herein as Surety waive any defense based upon any defect in the bond, including, but not limited to, an erroneous, improper or defective insertion or omission to insert or apparent alteration of the expiration year and/or amount of the penal sum of the bond and further waive any objection that the bond bears a printed, typewritten or facsimile signature. Any bond filed with the State Liquor Authority shall be admissible in evidence in any court on application of the State Liquor Authority or People of the State of New York without further proof of due execution thereof by or on behalf of the principal and surety and shall be conclusively presumed to have been duly executed by and on behalf of the principal and surety. Any bond filed with the State Liquor Authority and bearing the printed or facsimile name of the surety or the typewritten or facsimile signature of its representative shall be conclusively presumed to be the duly issued bond of the surety company and binding on it, its successors and assigns for the amount specified in Part 81 of Subtitle B of Title 9 of the Official Compilation of Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the State Liquor Authority).

STATE OF NEW YORK LIQUOR AUTHORITY

ORIGINAL

11 Park Place, NY, NY 10007
2nd floor, A-wing, 84 Holland Ave., Albany, N.Y. 12208
125 Main Street, Buffalo, N.Y. 14203

RENEWAL APPLICATION RETAIL LIQUOR OR WINE LICENSE

The Original and Local Board Copy of this application must be properly executed and signed and mailed in the enclosed return envelope and must be accompanied by the following:
(1) CERTIFIED CHECK, BANK OFFICERS' CHECK or DRAFT, or MONEY ORDER for the required fee payable to the order of the State Liquor Authority.
(2) REQUIRED BOND, issued by any surety company authorized to execute such bonds in the State of New York. Such bond must be completely filled out, signed and dated by both the surety company and the licensee, and must be an original document.
(3) Such other documents as required by reason of answers made to questions in this application and/or set forth in instruction Form 260-007 or 260-009.

ALL QUESTIONS MUST BE ANSWERED IN BOXES BELOW. (See Instructions on enclosed Form 260-007 or 260-009.)

Any false answer or statement made by the applicant constitutes perjury and will subject any license issued hereunder to revocation.

The applicant hereby applies for a renewal of RETAIL LIQUOR or WINE license now held by applicant.

Full name of applicant. (If partnership, name all partners) STARJEM RESTAURANT, INC.		Trade name or other names under which applicant does business FRESCO	Premises Telephone No. 212-935-3434
Street address of premises to be licensed 34 EAST 52ND STREET a/k/a 485 MADISON AVENUE		Post office address of premises (if different)	
City, town or village,—Zip Code NEW YORK, NEW YORK 10022	County NEW YORK	City, town or village,—Zip Code (if different)	
Name of owner of building in which the premises to be licensed are located JACK RESNICK & SONS	Landlords Telephone No. 212-421-1300	Address of owner of building 110 EAST 59TH STREET, NY, NY 10022	

1. IF ANY CHANGES IN FACTS HAVE OCCURRED SINCE THE SIGNING OF THE APPLICATION FOR YOUR CURRENTLY HELD LICENSE WHICH HAVE NOT BEEN REPORTED TO AND ACKNOWLEDGED BY THE STATE LIQUOR AUTHORITY, ANSWER "YES" IN BOX #1 AND SET FORTH DETAILS OF CHANGES IN FACTS IN THE APPROPRIATE SCHEDULES A AND/OR B BELOW. IF NO CHANGES IN FACTS HAVE OCCURRED, ANSWER "NO" IN BOX #1.

1. Yes or No
NO

Use this schedule "A" to set forth details of arrests, summonses and/or convictions which have occurred since the signing of the application for the currently held license and have not been reported to the Authority or having been reported had not been acknowledged by the Authority.

Name of Defendant	Connection with business (Licensee, employee, patron or other)	Crime or Offense	Date	Disposition in each case

Use this schedule, "B" to set forth details of an outstanding loans and/or such "changes" (other than arrests, etc.) which had not been reported to the Authority or having been reported, had not been acknowledged by the Authority. (See instruction Form 260-007 or 260-009.) (If more space is needed attach rider.)

Nature of Change	Date	Details

If change is in corp. setup, please indicate if anyone not presently a principal is involved.

2. (a) State whether said licensed business presently is regularly kept open and operated by the applicant.

Yes or No

2. (a) **YES**

(b) If not, indicate date premises were closed, and

Date Closed

(b)

(c) State whether license certificate is deposited in safekeeping with the appropriate Local A.B.C. Board.

Yes or No

(c)

3. (a) Did anyone assist you in preparing this application?

Yes or No

3. (a) **YES**

(b) If so, give name, address and business of each such person.

Name, address, business and phone

Warren B. Pesetsky, Esq.

(c) Date this application was mailed to State Liquor Authority. IT IS NOT NECESSARY FOR YOU TO EMPLOY ANY PERSON, AGENCY OR ORGANIZATION TO ASSIST YOU IN FILING THIS APPLICATION. BEWARE OF PERSONS CLAIMING TO BE ABLE TO ASSIST YOU IN SECURING ACTION ON YOUR APPLICATION.

(c) Date

Pesetsky & Bookman

325 Broadway, Suite 501

New York, New York 10007

APPLICANT UNDERSTANDS THAT ANY CHANGE IN ANY OF THE FACTS REPORTED HEREIN WHICH OCCURS BETWEEN THE SIGNING OF THIS APPLICATION AND THE COMMENCEMENT OF THE NEW LICENSE PERIOD MUST BE REPORTED TO THE AUTHORITY IN WRITING BY CERTIFIED OR REGISTERED MAIL WITHIN 48 HOURS. ANY CHANGE OF FACTS OCCURRING AFTER THE COMMENCEMENT OF THE NEW LICENSE PERIOD MUST BE REPORTED WITHIN 10 DAYS. THE FAILURE TO COMPLY WITH THE FOREGOING IS A GROUND FOR THE REVOCATION, CANCELLATION OR SUSPENSION OF THE LICENSE.

APPLICANT HEREBY AGREES THAT ANY APPLICATION FILED UNDER THE ALCOHOLIC BEVERAGE CONTROL LAW BY ANY PERSON HAVING ANY INTEREST, DIRECT OR INDIRECT, EITHER IN THE PREMISES OR IN THE BUSINESS TO BE LICENSED, FOR ANY LICENSE OR PERMIT, SHALL BE DEEMED AND MADE A PART HEREOF AND CONSIDERED BY THE STATE LIQUOR AUTHORITY IN ACTING UPON THIS APPLICATION.

THIS CERTIFICATION MUST BE SIGNED AND DATED by INDIVIDUAL APPLICANT and EACH MEMBER of PARTNERSHIP

The undersigned, each for himself, certifies that he is the applicant above named; that he knows the contents of the above application and the statements contained therein, that the same are true of his own knowledge, that he has complied and will continue to comply with all conditions upon which the original license was issued; that no physical changes have been made to the licensed premises since the issuance of the original license, except those authorized by the State Liquor Authority; and represents that all statements made in the original application for this license and in any and all applications for renewal thereof are true and correct, except as modified in subsequent renewal applications or as otherwise reported to and acknowledged or approved by the Authority.

Dated _____

(Signature of applicant or of each partner)

(Residence)

(Home Phone)

THIS CERTIFICATION TO BE SIGNED AND DATED BY A CORPORATION

Marion Scotto

certifies that he is

President

(Title)

of the above named applicant corporation; that he knows the contents of the above application and the statements and answers therein, that the same are true of his own knowledge; that he has been authorized by order of the Board of Directors of said applicant corporation to make the statements and answers in this application in behalf of said applicant corporation with the same force and effect as if said corporation made such statements and answers itself; that it has complied and will continue to comply with all conditions upon which the original license was issued; that no physical changes have been made to the licensed premises since the issuance of the original license, except those authorized by the State Liquor Authority; and represents that all statements made in the original application for this license and in any and all applications for renewal thereof are true and correct, except as modified in subsequent renewal applications or as otherwise reported to and acknowledged or approved by the Authority.

Dated _____

(Signature of authorized officer)

350 East 72nd Street, NY, NY 10021 212-472-4466

(Residence)

(Home Phone)

NOTE:

ALL QUESTIONS MUST BE ANSWERED ON ALL COPIES, NO CARBON HAS BEEN PROVIDED.

Renewal Application for
RETAIL LIQUOR OR WINE LICENSE

(Entry to be made by State Liquor Authority)

11 Park Place, NY, NY 10007
2nd floor, A-wing, 84 Holland Ave., Albany, N.Y. 12208
125 Main Street, Buffalo, N.Y. 14203

ENDORSEMENT or DUPLICATE

Zone County Serial Class Deposit Date Slip No.

Fee \$ _____ Audited by _____

Endorsement Cert. _____

Dup. Cert. No. _____ Date _____

Approved by _____

ENTRY RECORD

Zone County Serial Class Deposit Date Slip No.

Fee \$ _____ Audited by _____

APPLICATION APPROVED

DATE _____

S.L.A. By _____

DATA ENTERED

**NOTE: FEES SUBJECT TO
INCREASE APRIL 1**

STARJEM RESTAURANT INC

**34 E 52ND STREET
AKA 485 MADISON AVENUE
NEW YORK NY 10022**

Ch Bank & Trust Co.

OP 06650

002208

NEW 11/01/96

NOTICE: FEES HAVE INCREASED

5,190.00

X

FEE

99 1 NEW OP 06650 252

Credit
Period
Group #

Certificate
Number

Write these numbers
on your check

License
Class Code

Zone
Office

2

06650 252

252

1



STATE OF NEW YORK
EXECUTIVE DEPARTMENT
DIVISION OF ALCOHOLIC BEVERAGE CONTROL
250 BROADWAY, NEW YORK, N.Y. 10007

IN REPLYING REFER TO

November 12, 1993

MRS. MARION SCOTTO
8220 11TH AVENUE
BROOKLYN, NY 11228

RE: NEW YORK OP 6650
STARJEM RESTAURANT, INC.
34 EAST 52ND STREET
AKA 485 MADISON AVENUE
NEW YORK, NY 10022

APPROVAL EXPIRATION
DATE: JANUARY 1, 1994

DEAR MADAM:

The Members of the Authority at their regular meeting held on approved NOVEMBER 10, 1993 your application for an ON PREMISES LIQUOR LICENSE subject to submission by you of an affidavit to our LICENSE PROCESSING UNIT, 250 Broadway, New York, NY 10007, 16th floor, indicating compliance with the following conditions:

1. That premises are constructed and equipped in accordance with the plans and specifications as approved by the Liquor Authority.
2. That the premises will be provisioned, staffed and conducted in accordance with the plan of management and/or method of operation submitted with the application to the Liquor Authority.
3. That the financing of the business, including the construction of the proposed premises is in accordance with information supplied in support of the application to the Liquor Authority.
4. That the premises have been completed and are ready to be opened and operated by the applicant.

- continued -

All the above is True
Marion Scotto

NEW YORK OP 6250
STARJEM RESTAURANT, INC.

November 12, 1993

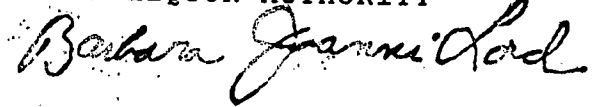
- 2 -

5. Subject to submission of SLA FORM 180-12, in duplicate, if you are an employer of one or more employees or a corporation.

This letter of approval shall be void if you do not comply with the conditions contained in this letter prior to the expiration date set forth above. If you cannot comply within the time allowed, you may seek an extension of time. Instructions for making application for an extension of this letter of approval are enclosed herewith.

Very truly yours,

STATE LIQUOR AUTHORITY



BARBARA JOANNI LORD
SECRETARY TO THE AUTHORITY

BJL:jb

ENCLS.

CC: GUY T. PARISI, ESQ.
112 WOODS END ROAD
CHAPPAQUA, NY 10514

STATE OF NEW YORK
LIQUOR AUTHORITY

IMPORTANT NOTICE TO NEW LICENSEES

REQUIREMENTS BEFORE A LICENSE MAY BE ISSUED

SALES TAX

The New York State Sales Tax Law requires that a person engaging in the sale of products subject to sales tax obtain from the Department of Taxation and Finance a "CERTIFICATE OF AUTHORITY TO COLLECT SALES TAXES". The Law requires that this Certificate be obtained.

Applicants will be required to present a copy of their "CERTIFICATE OF AUTHORITY TO COLLECT TAXES" to the State Liquor Authority before their license may be issued. Applicants may avoid delay in the issuance of their licenses by presenting a copy of their "CERTIFICATE OF AUTHORITY TO COLLECT SALES TAXES" with their initial application for a license.

Enter your Certificate # _____

AGENCY USE

Verified by _____ Date _____

WORKERS COMPENSATION INSURANCE

Under the Workers' Compensation Law, your license cannot be issued if you are an employer of one or more employees, or a corporation, unless you have secured Workers' Compensation and Disability Benefits insurance policies.

Serial No. 11111111 Name Stapfen Restaurant Corp.

Premises address 34 E. 52 St. Zip Code 10022

1. Are you an employer with one or more employees or a corporation? Please answer Yes or No

Yes

2. If yes, state the following:

WC Policy No. [REDACTED] Company Paramount Insurance

Eff. Date 11/3/93, and DB Policy No. [REDACTED]

Company Public Service Mutual Ins. Co. Eff. Date 11/3/93

Signature Marion Scott Date 11/12/93

(If answer to question 1 is yes, question 2 must be completely filled out. This form must be submitted to License Processing Unit at the appropriate zone office prior to issuance of new license.)

STATE OF NEW YORK LIQUOR AUTHORITY

ORIGINAL

11 Park Place, NY, NY 10007
2nd floor, A-wing, 84 Holland Ave., Albany, N.Y. 12208
125 Main Street, Buffalo, N.Y. 14203

RENEWAL APPLICATION
RETAIL LIQUOR
OR WINE LICENSE

The Original of this application must be properly executed and signed and mailed in the enclosed return envelope and must be accompanied by the following:
(1) CERTIFIED CHECK, BANK OFFICERS' CHECK and DRAFT, MONEY ORDER or PERSONAL CHECK for the required fee payable to the order of the State Liquor Authority.
(2) REQUIRED BOND, issued by any surety company authorized to execute such bonds in the State of New York. Such bond must be completely filled out, signed and dated by both the surety company and the licensee, and must be an original document.
(3) Such other documents as required by reason of answers made to question in this application and / or set forth in instruction Form 260-007 or 260-009.

ALL QUESTIONS MUST BE ANSWERED IN BOXES BELOW. (See Instructions on enclosed Form 260-007 or 260-009.)
Any false answer or statement made by the applicant constitutes perjury and will subject any license issued hereunder to revocation.

The applicant hereby applies for a renewal of RETAIL LIQUOR or WINE license now held by applicant.

Full name of applicant. (If partnership, name all partners)		Trade name or other names under which applicant does business	Premises Telephone No.
STARJEM RESTAURANT, INC		FRESCO BY SCOTTO	(212) 935-3434
Street address of premises to be licensed		Post office address of premises (if different)	
34 East 52nd Street A/K/A 485 Madison Avenue			
City, town or village,—Zip Code	County	City, town or village,—Zip Code (if different)	
New York, New York 10022	New York		
Name of owner of building in which the premises to be licensed are located	Landlords Telephone No.	Address of owner of building	

1. IF ANY CHANGES IN FACTS HAVE OCCURRED SINCE THE SIGNING OF THE APPLICATION FOR YOUR CURRENTLY HELD LICENSE WHICH HAVE NOT BEEN REPORTED TO AND ACKNOWLEDGED BY THE STATE LIQUOR AUTHORITY, ANSWER "YES" IN BOX #1 AND SET FORTH DETAILS OF CHANGES IN FACTS IN THE APPROPRIATE SCHEDULES A AND/OR B BELOW. IF NO CHANGES IN FACTS HAVE OCCURRED, ANSWER "NO" IN BOX #1.

NO

Use this schedule "A" to set forth details of arrests, summonses and/or convictions which have occurred since the signing of the application for the currently held license and have not been reported to the Authority or having been reported had not been acknowledged by the Authority.

Name of Defendant	Connection with business (Licensee, employee, patron or other)	Crime or Offense	Date	Disposition in each case

Use this schedule, "B" to set forth details of any outstanding loans and / or such "changes" (other than arrests, etc.) which had not been reported to the Authority or having been reported, had not been acknowledged by the Authority. (See instruction Form 260-007 or 260-009.) (If more space is needed attach rider.)

Nature of Change	Date	Details

If change is in corp. setup, please indicate if anyone not presently a principal is involved.

2. (a) State whether said licensed business presently is regularly kept open and operated by the applicant.		2. (a) YES
(b) If not, indicate date premises were closed, and		Date Closed
(c) State whether license certificate is deposited in safekeeping with the appropriate Local A.B.C. Board.		(b)
		(c)
3. (a) Did anyone assist you in preparing this application?	3. (a) YES	Name, address, business and phone
(b) If so, give name, address and business of each such person.		(b) ROBERT V. FERRARI 300 East 42nd Street New York, New York 10017
(c) Date this application was mailed to State Liquor Authority. IT IS NOT NECESSARY FOR YOU TO EMPLOY ANY PERSON, AGENCY OR ORGANIZATION TO ASSIST YOU IN FILING THIS APPLICATION. BEWARE OF PERSONS CLAIMING TO BE ABLE TO ASSIST YOU IN SECURING ACTION ON YOUR APPLICATION.	(c) Date 10/7/99	Attorney for Licensee

APPLICANT UNDERSTANDS THAT ANY CHANGE IN ANY OF THE FACTS REPORTED HEREIN WHICH OCCURS BETWEEN THE SIGNING OF THIS APPLICATION AND THE COMMENCEMENT OF THE NEW LICENSE PERIOD MUST BE REPORTED TO THE AUTHORITY IN WRITING BY CERTIFIED OR REGISTERED MAIL WITHIN 48 HOURS. ANY CHANGE OF FACTS OCCURRING AFTER THE COMMENCEMENT OF THE NEW LICENSE PERIOD MUST BE REPORTED WITHIN 10 DAYS. THE FAILURE TO COMPLY WITH THE FOREGOING IS A GROUND FOR THE REVOCATION, CANCELLATION OR SUSPENSION OF THE LICENSE.

APPLICANT HEREBY AGREES THAT ANY APPLICATION FILED UNDER THE ALCOHOLIC BEVERAGE CONTROL LAW BY ANY PERSON HAVING ANY INTEREST, DIRECT OR INDIRECT, EITHER IN THE PREMISES OR IN THE BUSINESS TO BE LICENSED, FOR ANY LICENSE OR PERMIT, SHALL BE DEEMED AND MADE A PART HEREOF AND CONSIDERED BY THE STATE LIQUOR AUTHORITY IN ACTING UPON THIS APPLICATION.

THIS CERTIFICATION MUST BE SIGNED and DATED by INDIVIDUAL APPLICANT and EACH MEMBER of PARTNERSHIP

The undersigned, each for himself, certifies that he is the applicant above named; that he knows the contents of the above application and the statements contained therein, that the same are true of his own knowledge, that he has complied and will continue to comply with all conditions upon which the original license was issued; that no physical changes have been made to the licensed premises since the issuance of the original license, except those authorized by the State Liquor Authority; and represents that all statements made in the original application for this license and in any and all applications for renewal thereof are true and correct, except as modified in subsequent renewal applications or as otherwise reported to and acknowledged or approved by the Authority.

Dated _____

(Signature of applicant or of each partner)

(Residence)

(Home Phone)

THIS CERTIFICATION TO BE SIGNED AND DATED BY A CORPORATION

Marion Scotto

certifies that he is X

(Title)

Pres.

of the above named applicant corporation; that he knows the contents of the above application and the statements and answers therein, that the same are true of his own knowledge; that he has been authorized by order of the Board of Directors of said applicant corporation to make the statements and answers in this application in behalf of said applicant corporation with the same force and effect as if said corporation made such statements and answers itself; that it has complied and will continue to comply with all conditions upon which the original license was issued; that no physical changes have been made to the licensed premises since the issuance of the original license, except those authorized by the State Liquor Authority; and represents that all statements made in the original application for this license and in any and all applications for renewal thereof are true and correct, except as modified in subsequent renewal applications or as otherwise reported to and acknowledged or approved by the Authority.

Dated October 7, 1999

(Signature of authorized officer)

(Residence)

(Home Phone)

X Marion Scotto X 350 E. 72 St. 935-3434

NOTE:

ALL QUESTIONS MUST BE ANSWERED. NO COPIES HAVE BEEN PROVIDED.

Renewal Application for
RETAIL LIQUOR OR WINE LICENSE

(Entry to be made by State Liquor Authority)

11 Park Place, NY, NY 10007
2nd floor, A-wing, 84 Holland Ave., Albany, N.Y. 12208
125 Main Street, Buffalo, N.Y. 14203

ENDORSEMENT or DUPLICATE

Zone County Serial Class Deposit Date Slip No.

Fee \$ _____ Audited by _____

Endorsement Cert. _____

Dup. Cert. No. _____ Date _____

Approved by _____

ENTRY RECORD

Zone County Serial Class Deposit Date Slip No.

Fee \$ _____ Audited by _____

APPLICATION APPROVED

DATE _____

S.L.A. By _____

JD

DATA ENTERED

ROBERT MCKNIGHT

005130

P

STARJEM RESTAURANT INC

34 E 52ND STREET

AKA 485 MADISON AVENUE

NEW YORK

NY 10022

OP - 06650

NEW

11/01/99

RECEIVED OCT 13 1999

2

06650 252

252

1

3,490.00

X

Credit
Period
Group #

Certificate
Number

Write these numbers
on your check

License
Class Code

Zone
Office

FEE

21 1 NEW

OP 06650 252

EXCISE BOND UNDERWRITERS

Bond Form L-9 Prescribed by
New York State Liquor Authority
November 1963

100 WILLIAM STREET • NEW YORK, N.Y. 10038

BOND IN SUPPORT OF APPLICATION FOR LICENSE OR
PERMIT UNDER THE NEW YORK ALCOHOLIC
BEVERAGE CONTROL LAW

LIQUOR

001--08

X-B12868--00

BOND EXPIRES IN

OCTOBER, 2001

BOND NUMBER

Penal Sum of Bond
1,000.00

Plus Costs

KNOW ALL MEN BY THESE PRESENTS, that we,

Name of Applicant

STARJEM RESTAURANT INC.

Address of Place of Business

34 EAST 52ND STREET
A/K/A 485 MADISON AVENUE
NEW YORK NY 10022

In the county of NEW YORK State of NEW YORK as Principal, and
having an office and usual place of business at

CONTINENTAL CASUALTY CO.
39 BROADWAY, SUITE 2302
NEW YORK NY 10006

a surety company approved by the Superintendent of Insurance of New York State as to solvency and responsibility and authorized to transact business in New York State, as Surety, are held and firmly bound unto the People of the State of New York in the penal sum set forth above and for the payment of any costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1,000.00) for the payment of which sum or sums, well and truly to be made, we, the said principal and surety, bind ourselves, successors, and assigns, respectively, jointly and severally, firmly by these presents.

WHEREAS, the above bounden principal is making application to the New York State Liquor Authority, for a license or permit under the Alcoholic Beverage Control Law and the said State Liquor Authority, by Part 81 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the Authority), having required the principal to file with it a bond to the People of the State of New York, as provided in said Law aforesaid.

NOW, THEREFORE, the conditions of this obligation are such that if the said license or permit applied for, which expires on the date designated in said license or permit, is granted to the said principal and the principal will not, during the license or permit period, suffer or permit any violation of the provisions of the Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or give cause as provided in the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the State Liquor Authority), for the cancellation, revocation or suspension of said license or permit or the issuance of an order of warning, and will pay all fines and penalties which shall accrue thereunder, together with all costs taxed or allowed in any action or proceeding brought or instituted for a violation of any of the provisions of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or for cause for the cancellation, revocation or suspension or issuance of an order of warning as provided in the Alcoholic Beverage Control Law or Rules of the Authority, or costs taxed or allowed in any review pursuant to Section 121 of the Alcoholic Beverage Control Law; then this obligation shall be void; otherwise to remain in full force and effect; subject, however, to the conditions stated on reverse side.

IN WITNESS WHEREOF the parties hereto have caused these presents to be signed and sealed this 7 day of October 1999

STARJEM RESTAURANT INC.

L.S.

BY:

Marion Scott
Principal

CONTINENTAL CASUALTY CO.

↑
APPLICANT MUST SIGN HERE

John L. Corneau
Attorney-in-fact

(OVER)

BOND IN SUPPORT OF APPLICATION FOR LICENSE OR PERMIT
UNDER THE NEW YORK ALCOHOLIC BEVERAGE CONTROL LAW

CONDITIONS

1. An action for the breach of any condition of this bond may be maintained without previous conviction or prosecution for the violation of any provision of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by the State Liquor Authority, or for cause as provided by the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the Authority).
2. The aggregate liability of the surety on account of any and all defaults hereunder shall in no event exceed the penal sum of this bond plus costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1000.00).
3. Upon the payment of any loss arising under this bond, the surety shall be subrogated to the rights and remedies of the obligee against the principal to recover from the principal any amount so paid.
4. Any action brought for the penal sum of this bond shall be commenced within twenty-four months after the expiration of the license or permit period aforementioned, or for costs within one year after final disposition of any action or proceeding. In the event of the institution of any action or proceeding to review the Authority's determination, the period of 24 months shall not commence until the final determination of the proceeding or litigation.
5. This bond shall be effective during the time the aforementioned license or permit shall be in effect and during any extension thereof.
6. A breach of any condition of this bond shall be deemed to have been established by the revocation, cancellation or suspension of the aforesaid license or permit or the issuance of an order of warning by the State Liquor Authority unless said revocation, cancellation, suspension or order of warning shall have been reversed or annulled by a Court of competent jurisdiction.
7. In any action or proceeding to recover on this bond, the principal and the company named herein as Surety waive any defense based upon any defect in the bond, including, but not limited to, an erroneous, improper or defective insertion or omission to insert or apparent alteration of the expiration year and/or amount of the penal sum of the bond and further waive any objection that the bond bears a printed, typewritten or facsimile signature. Any bond filed with the State Liquor Authority shall be admissible in evidence in any court on application of the State Liquor Authority or People of the State of New York without further proof of due execution thereof by or on behalf of the principal and surety and shall be conclusively presumed to have been duly executed by and on behalf of the principal and surety. Any bond filed with the State Liquor Authority and bearing the printed or facsimile name of the surety or the typewritten or facsimile signature of its representative shall be conclusively presumed to be the duly issued bond of the surety company and binding on it, its successors and assigns for the amount specified in Part 81 of Subtitle B of Title 9 of the Official Compilation of Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the State Liquor Authority).

PAYMENT ELECTION
(FOR TWO-YEAR LICENSES)

I hereby elect to pay my two year license fee as follows:

☒ **Payment in full** (see attached fee schedule)

Or

☐ **Annual payments** (see attached fee schedule)

1st payment due with this renewal application

2nd payment due on or before one year from
the effective date of your license

I acknowledge that if I fail to make the second (2nd) annual payment in a
timely manner that my license could be subject to revocation, cancellation,
suspension or a fine could be levied.

October 7, 1999

DATE

Marion Scott
SIGNATURE

(and title if a Corporation)



STATE LIQUOR AUTHORITY

STATE OF NEW YORK
EXECUTIVE DEPARTMENT
DIVISION OF ALCOHOLIC BEVERAGE CONTROL
STATE LIQUOR AUTHORITY

- ☐ 84 Holland Avenue
Albany, New York 12208
- ☐ 11 Park Place
New York, New York 10007
- ☐ 125 Main Street
Buffalo, New York 14203

**CERTIFICATE OF OCCUPANCY
RENEWAL STIPULATION**

Licensee: <u>STARJEM RESTAURANT, INC.</u>
D/B/A Trade Name: <u>FRESCO</u>
Address: <u>43 East 52nd Street. A/K/A 485 Madison Avenue, NY, NY 10022</u>

I affirm as the licensee and as a condition for renewing my on-premises license for the above mentioned premises that the premises are legally zoned for the business I intend to operate. Additionally, I have complied with all zoning requirement and I am in compliance with all State laws, local laws and ordinances as they apply to the possession, occupancy and use of the premise.

Further, as a condition of continuing to being licensed, I understand that I am required to submit a valid permanent Certificate of Occupancy (C of O) or such other document issued by the local code enforcement agency for the premises to the State Liquor Authority.

I make this statement knowing that the State Liquor Authority,

1. Relies on this above affirmation as one of the requirements in determining licenseability under Section 109 of the A.B.C. Law;
2. Requires that as a condition of renewing my license, I submit a valid certificate or other such document issued by the local code enforcement agency to the S.L.A. for the applied for premise within 60 days of renewing the license;

Additionally, I understand and agree that if I cannot produce the documents required under Section 109 of the A.B.C. Law the license application will be disapproved without prejudice: and if the license has already been issued, I will be granted an administrative hearing and if it is determined that no valid C of O exists then I will surrender the license.

I, Marion Scotto, affirm as the President
of the above mentioned licensee, that I am authorized to make this statement on its behalf.

October 7, 1999

Date

Marion Scotto
Signature

NOTIFICATION RIDER TO RENEWAL APPLICATION

All renewal applicants EXCEPT Grocery and Drug Store Beer MUST complete this form.

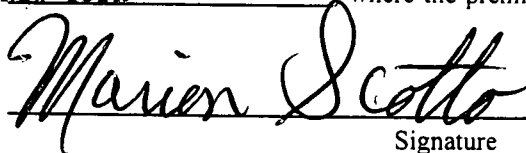
NOTICE TO MUNICIPALITY/COMMUNITY BOARD

You are required by the Alcoholic Beverage Control Law, Section 64, Subdivision 2a, upon receipt of an application for a license to sell liquor at retail for consumption on the premises, to promptly notify, in writing, the Clerk of the Village, Town or City wherein the premises are located of your application to the State Liquor Authority not less than thirty days prior to the submission of your application to the Authority. In the City of New York, such notification is to be sent to the community board with jurisdiction over the area in which the premises is located. Notification pursuant to this Section is to be sent by certified mail, return receipt requested.

COMPLETE AND RETURN WITH RENEWAL APPLICATION

CERTIFICATION RIDER TO APPLICATIONS

I hereby certify that I have complied with the requirements of Section 64, Subdivision 2a of the Alcoholic Beverage Control Law, and have sent notification of my application to become licensed, by **certified mail, return receipt requested** to the Clerk of the City, Town, Village (circle one) of _____ or, in New York City, the Clerk of Community Board # 5 Borough of New York where the premises are located.


Signature

NY0P06650

License Number

October 7, 1999

Date

NOTE: FAILURE TO NOTIFY THE APPROPRIATE MUNICIPALITY OR COMMUNITY BOARD AT LEAST THIRTY (30) DAYS PRIOR TO THE SUBMISSION OF YOUR APPLICATION OR RENEWAL MAY RESULT IN A DELAY IN PROCESSING YOUR APPLICATION.

You must keep the certified mail receipt for your records!

PHONE LISTINGS FOR NEW YORK CITY RESIDENTS

If you are unsure of which Community Board serves the area in which your premises are located, call the number listed below for the office of your Borough President:

Manhattan

212-669-8300

Bronx

718-590-3500

Queens

718-286-2900

Staten Island

718-816-2200

Brooklyn

718-802-3700

STATE OF NEW YORK - LIQUOR AUTHORITY
Renewal Application (Directions for Completion enclosed)

License fee: 3,400.00
Filing fee: 90.00
Total fee due: 3,490.00
Due now if choosing installment option: 1,790.00

081619

New effective date: 11/01/2001
New expiration date: 10/31/2003

STARJEM RESTAURANT INC

34 E 52ND STREET AKA 485 MADISON AVENUE
NEW YORK, NY 10022

RECEIVED OCT 8 2001

NEW SERIAL#: 1027039 OLD SERIAL#: 011NEWOP0006650252

Make sure all names and address information is correct, if not make the necessary changes on the reverse side.

SPECIAL MAILING REQUEST: Complete if you want your license mailed to an address other than the licensed premises address:

ALL QUESTIONS MUST BE ANSWERED.

Any false answer or statement made by the applicant constitutes perjury and will subject any license hereunder to revocation.

1. If any changes in facts have occurred since the signing of the application for your currently held license which have not been reported to and acknowledged by the State Liquor Authority write "YES" in Box #1 and set forth details of changes in facts in the appropriate schedules A and/or B on the reverse side. If no changes in facts have occurred, write "NO" in Box #1.

1. NO

2. State whether said licensed business presently is regularly kept open and operated by the applicant.

YES

2. ☒

NO

☐

3. If your premises are closed, state whether your license certificate is deposited in safekeeping with the appropriate zone office of the NYS Liquor Authority.

3. ☐

☐

Not
Applicable

☒

APPLICANT UNDERSTANDS THAT ANY CHANGE IN ANY OF THE FACTS REPORTED HEREIN WHICH OCCURS BETWEEN THE SIGNING OF THIS APPLICATION AND THE COMMENCEMENT OF THE NEW LICENSE PERIOD MUST BE REPORTED TO THE AUTHORITY IN WRITING BY CERTIFIED OR REGISTERED MAIL WITHIN 48 HOURS. ANY CHANGE OF FACTS OCCURRING AFTER THE COMMENCEMENT OF THE NEW LICENSE PERIOD MUST BE REPORTED WITHIN 10 DAYS. THE FAILURE TO COMPLY WITH THE FOREGOING IS A GROUND FOR THE REVOCATION, CANCELLATION OR SUSPENSION OF THE LICENSE.

APPLICANT HEREBY AGREES THAT ANY APPLICATION FILED UNDER THE ALCOHOLIC BEVERAGE CONTROL LAW BY ANY PERSON HAVING ANY INTEREST, DIRECT OR INDIRECT, EITHER IN THE PREMISES OR IN THE BUSINESS TO BE LICENSED, FOR ANY LICENSE OR PERMIT, SHALL BE DEEMED AND MADE A PART HEREOF AND CONSIDERED BY THE STATE LIQUOR AUTHORITY IN ACTING UPON THIS APPLICATION.

THIS CERTIFICATION MUST BE SIGNED and DATED by INDIVIDUAL APPLICANT and EACH MEMBER of A PARTNERSHIP

INDIVIDUAL APPLICANTS AND EACH MEMBER OF A PARTNERSHIP COMPLETE THIS SECTION.

The undersigned, each for himself, certifies that he is the applicant above named; that he knows the contents of the above application and the statements contained therein, that the same are true of his own knowledge, that he has complied and will continue to comply with all conditions upon which the original license was issued; that no physical changes have been made to the licensed premises since the issuance of the original license, except those authorized by the State Liquor Authority; and represents that all statements made in the original application for this license and in any and all applications for renewal thereof are true and correct, except as modified in subsequent renewal applications or as otherwise reported to and acknowledged or approved by the Authority.

Date _____

(Signature of licensee(s))

(Address)

(Home Phone)

THIS CERTIFICATION TO BE SIGNED AND DATED BY A CORPORATION

CORPORATE OFFICER COMPLETE THIS SECTION

MARION SCOTTO

certifies that he is

PRESIDENT

(Title of Corporate Officer)

of the above named applicant corporation; that he knows the contents of the above application and the statements and answers therein, that the same are true of his own knowledge; that he has been authorized by order of the Board of Directors of said applicant corporation to make the statements and answers in this application in behalf of said applicant corporation with the same force and effect as if said corporation made such statements and answers itself; that it has complied and will continue to comply with all conditions upon which the original license was issued; that no physical changes have been made to the licensed premises since the issuance of the original license, except those authorized by the State Liquor Authority; and represents that all statements made in the original application for this license and in any and all applications for renewal thereof are true and correct, except as modified in subsequent renewal applications or as otherwise reported to and acknowledged or approved by the Authority.

Dated OCTOBER 5, 2001

Marion Scott

(Signature of authorized officer)

350 EAST 72ND STREET
NEW YORK, NY 10021

(Address and Home Telephone)

212-472-4466

DATE

APPROVED

DISAPPROVED

S.L.A. BY

STATE OF NEW YORK - LIQUOR AUTHORITY
(Renewal Application)

ADDRESS CHANGES OR CORRECTIONS: Note if address was changed by Post Office, City, Town, Village or 911 Emergency Systems, please submit notice of authorization from appropriate agency.

Street address of premises to be licensed		Post office address of premises (If different)
City, town or village - Zip Code	Telephone Number	City, town or village - Zip Code (If different)
Landlord Name		Landlord Address

1a. If you answered yes to Question 1, on the reverse, complete the appropriate schedule "A" or "B".

Use this schedule "A" to set forth details of arrests, summonses and/or convictions which have occurred since the signing of the application for the currently held license and have not been reported to the Authority or having been reported have not been acknowledged by the Authority. (If more space is needed, attach rider).

Name of Defendant	Connection with Business (Licensee, employee, patron or other)	Crime or Offense	Date	Disposition in Each case

1b. **Use this schedule, "B" to set forth details of any outstanding loans and/or such "changes" (other than arrests, etc.) which have not been reported to the Authority or having been reported, had not been acknowledged by the Authority. (See instruction forms. If more space is needed, attach rider).**

Nature of Change	Date	Details

NOTIFICATION RIDER TO RENEWAL APPLICATION

ON PREMISES LICENSEES ONLY MUST COMPLETE THIS SECTION

NOTICE TO MUNICIPALITY/COMMUNITY BOARD

You are required by the Alcoholic Beverage Control Law, Section 64, Subdivision 2a, upon receipt of a renewal application for a license to sell alcoholic beverages at retail for consumption on the premises, to promptly notify, in writing, the Clerk of the Village, Town or City wherein the premises are located of your application to the State Liquor Authority not less than thirty days prior to the submission of your application to the Authority. In the City of New York, such notification is to be sent to the community board with jurisdiction over the area in which the premises is located. Notification pursuant to this Section is to be sent by certified mail, return receipt requested. **You must keep the certified mail receipt for your records.**

CERTIFICATION RIDER TO APPLICATIONS

I hereby certify that I have complied with the requirements of Section 64, subdivision 2a of the Alcoholic Beverage Control Law, and have sent notification of my renewal application to become licensed, **by certified mail, return receipt requested** to the Clerk of the City, Town, Village (circle one) of _____, or, in New York City, the Clerk of Community Board # 5 Borough of Manhattan where the premises are located.

Fresco
Trade Name
34 East 52 Street, New York, NY 10022
Address of Premises
Marion Scott 1027039 10/5/01
Signature License Number Date

NOTE: FAILURE TO NOTIFY THE APPROPRIATE MUNICIPALITY OR COMMUNITY BOARD AT LEAST THIRTY (30) DAYS PRIOR TO THE SUBMISSION OF YOUR APPLICATION OR RENEWAL MAY RESULT IN A DELAY IN PROCESSING YOUR APPLICATION.

You must keep the certified mail receipt for your records!

22

EXCISE BOND UNDERWRITERS

Bond Form L-9 Prescribed by
New York State Liquor Authority
November 1963

100 WILLIAM STREET • NEW YORK, N.Y. 10038

BOND IN SUPPORT OF APPLICATION FOR LICENSE OR
PERMIT UNDER THE NEW YORK ALCOHOLIC
BEVERAGE CONTROL LAW

BOND EXPIRES IN

BOND NUMBER

Penal Sum of Bond

Plus Costs

KNOW ALL MEN BY THESE PRESENTS, that we,

Name of Applicant

Address of Place of Business

In the county of NEW YORK State of NEW YORK as Principal, and
having an office and usual place of business at

a surety company approved by the Superintendent of Insurance of New York State as to solvency and responsibility and authorized to transact business in New York State, as Surety, are held and firmly bound unto the People of the State of New York in the penal sum set forth above and for the payment of any costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1,000.00) for the payment of which sum or sums, well and truly to be made, we, the said principal and surety, bind ourselves, successors, and assigns, respectively, jointly and severally, firmly by these presents.

WHEREAS, the above bounden principal is making application to the New York State Liquor Authority, for a license or permit under the Alcoholic Beverage Control Law and the said State Liquor Authority, by Part 81 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the Authority), having required the principal to file with it a bond to the People of the State of New York, as provided in said Law aforesaid.

NOW, THEREFORE, the conditions of this obligation are such that if the said license or permit applied for, which expires on the date designated in said license or permit, is granted to the said principal and the principal will not, during the license or permit period, suffer or permit any violation of the provisions of the Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or give cause as provided in the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the State Liquor Authority), for the cancellation, revocation or suspension of said license or permit or the issuance of an order of warning, and will pay all fines and penalties which shall accrue thereunder, together with all costs taxed or allowed in any action or proceeding brought or instituted for a violation of any of the provisions of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or for cause for the cancellation, revocation or suspension or issuance of an order of warning as provided in the Alcoholic Beverage Control Law or Rules of the Authority, or costs taxed or allowed in any review pursuant to Section 121 of the Alcoholic Beverage Control Law; then this obligation shall be void; otherwise to remain in full force and effect; subject, however, to the conditions stated on reverse side.

IN WITNESS WHEREOF the parties hereto have caused these presents to be signed and sealed this 5 day of OCTOBER, 2001

STARSEM RESTAURANT, INC. L.S.
Principal
BY: Marion Scott

↑
APPLICANT MUST SIGN HERE

John L. Corneau
Attorney-in-fact

ON-PREMISES LIQUOR LICENSE

2003 1 NEW OP 6650 252



LICENSE EFFECTIVE 11/01/2001

LICENSE EXPIRES 10/31/2003

NEW YORK STATE LIQUOR AUTHORITY

THE LICENSEE DESIGNATED BELOW IS HEREBY GRANTED PERMISSION, UNDER THE ALCOHOLIC BEVERAGE CONTROL LAW TO TRAFFIC IN ALCOHOLIC BEVERAGES PURSUANT TO THE TYPE OF LICENSE INDICATED IN THE UPPER LEFT HAND CORNER OF THIS CERTIFICATE AND ACCORDING TO THE STATUTES AND REGULATIONS PERTAINING THERETO.

THIS LICENSE SHALL NOT BE TRANSFERABLE TO ANY OTHER PERSON OR TO ANY OTHER PREMISES OR TO ANY OTHER PART OF THE BUILDING CONTAINING SUCH LICENSED PREMISES. IT SHALL NOT BE DEEMED A PROPERTY OR VESTED RIGHT AND MAY BE REVOKED AT ANY TIME PURSUANT TO LAW

SERIAL 1027039

COUNTY NEW YORK

CERTIFICATE NUMBER 568657

FILING FEE \$90.00

LICENSE FEE \$3,400.00

CYCLICAL CREDIT GROUP 2

STARJEM RESTAURANT INC

34 E 52ND STREET

NEW YORK NY 10022

Edward F. Kelly
Edward F. Kelly
CHAIRMAN

BEFORE COMMENCING OR DOING ANY BUSINESS FOR THE TIME FOR WHICH THIS LICENSE HAS BEEN ISSUED, THE SAID LICENSEE SHALL BE ENCLOSED IN A SUITABLE WOOD OR METAL FRAME, HAVING A CLEAR GLASS SPACE AND A SUBSTANTIAL WOOD OR METAL BACK SO THAT THE WHOLE OF SAID LICENSE MAY BE SEEN THEREIN, AND SHALL BE POSTED UP AND AT ALL TIMES DISPLAYED IN A CONSPICUOUS PLACE IN THE ROOM WHERE SUCH BUSINESS IS CARRIED ON, SO THAT ALL PERSONS VISITING SUCH PLACE MAY READILY SEE THE SAME.

SLA FORM 180403 (11/99)

Certificate No. 0568657

STATE OF NEW YORK - LIQUOR AUTHORITY
Renewal Application (Directions for Completion enclosed)

License fee: 4,352.00
Filing fee: 90.00
Total fee due: 4,442.00

New effective date: 11/01/2003
New expiration date: 10/31/2005

172103

SPECIAL MAILING REQUEST: Complete if you want your license mailed to an address other than the licensed premises address:

STARJEM RESTAURANT INC

34 E 52ND STREET AKA 485 MADISON AVENUE
NEW YORK, NY 10022

RECEIVED OCT 08 2003

NEW SERIAL#: 1027039 OLD SERIAL#: 031NEW 06650252
34 E 52ND STREET NEW YORK, NY 10022

Make sure all names and address information is correct, if not make the necessary changes on the reverse side.

ALL QUESTIONS MUST BE ANSWERED.

Any false answer or statement made by the applicant constitutes perjury and will subject any license hereunder to revocation.

1. If any changes in facts have occurred since the signing of the application for your currently held license which have not been reported to and acknowledged by the State Liquor Authority check "YES" and set forth details of changes in facts in the appropriate **schedules A and/or B** on the reverse side. If no changes in facts have occurred, check "NO".

YES NO
1. ☐ ☒

2. State whether said licensed business presently is regularly kept open and operated by the applicant.

2. ☒ ☐

3. If your premises are closed, state whether your license certificate is deposited in safekeeping with the appropriate zone office of the NYS Liquor Authority.

3. ☐ ☐

Not Applicable

☒

APPLICANT UNDERSTANDS THAT ANY CHANGE IN ANY OF THE FACTS REPORTED HEREIN WHICH OCCURS BETWEEN THE SIGNING OF THIS APPLICATION AND THE COMMENCEMENT OF THE NEW LICENSE PERIOD MUST BE REPORTED TO THE AUTHORITY IN WRITING BY CERTIFIED OR REGISTERED MAIL WITHIN 48 HOURS. ANY CHANGE OF FACTS OCCURRING AFTER THE COMMENCEMENT OF THE NEW LICENSE PERIOD MUST BE REPORTED WITHIN 10 DAYS. THE FAILURE TO COMPLY WITH THE FOREGOING IS A GROUND FOR THE REVOCATION, CANCELLATION OR SUSPENSION OF THE LICENSE.

APPLICANT HEREBY AGREES THAT ANY APPLICATION FILED UNDER THE ALCOHOLIC BEVERAGE CONTROL LAW BY ANY PERSON HAVING ANY INTEREST, DIRECT OR INDIRECT, EITHER IN THE PREMISES OR IN THE BUSINESS TO BE LICENSED, FOR ANY LICENSE OR PERMIT, SHALL BE DEEMED AND MADE A PART HEREOF AND CONSIDERED BY THE STATE LIQUOR AUTHORITY IN ACTING UPON THIS APPLICATION.

THIS CERTIFICATION MUST BE SIGNED and DATED by INDIVIDUAL APPLICANT and EACH MEMBER OF A PARTNERSHIP

INDIVIDUAL APPLICANTS AND EACH MEMBER OF A PARTNERSHIP COMPLETE THIS SECTION.

The undersigned, each for himself, certifies that he is the applicant above named; that he knows the contents of the above application and the statements contained therein, that the same are true of his own knowledge, that he has complied and will continue to comply with all conditions upon which the original license was issued; that no physical changes have been made to the licensed premises since the issuance of the original license, except those authorized by the State Liquor Authority; and represents that all statements made in the original application for this license and in any and all applications for renewal thereof are true and correct, except as modified in subsequent renewal applications or as otherwise reported to and acknowledged or approved by the Authority.

Date

(Signature of licensee(s))

(Home Address)

(Home Telephone)

THIS CERTIFICATION TO BE SIGNED AND DATED BY A CORPORATION AND CLUB

CORPORATE OFFICER OR ALCOHOLIC BEVERAGE CONTROL (ABC) OFFICER (CLUB) COMPLETE THIS SECTION

MARION SCOTTO
(Name of Corporate Officer)

certifies that he is

PRESIDENT
(Title of Corporate Officer)

of the above named applicant corporation; that he knows the contents of the above application and the statements and answers therein, that the same are true of his own knowledge; that he has been authorized by order of the Board of Directors of said applicant corporation to make the statements and answers in this application in behalf of said applicant corporation with the same force and effect as if said corporation made such statements and answers itself; that it has complied and will continue to comply with all conditions upon which the original license was issued; that no physical changes have been made to the licensed premises since the issuance of the original license, except those authorized by the State Liquor Authority; and represents that all statements made in the original application for this license and in any and all applications for renewal thereof are true and correct, except as modified in subsequent renewal applications or as otherwise reported to and acknowledged or approved by the Authority.

Date

OCTOBER 3, 2003

(Signature of authorized officer)

350 East 72 St.
New York, NY 10021

(Home Address and Home Telephone)

DATE

APPROVED

DISAPPROVED

S.L.A. BY

STATE OF NEW YORK - LIQUOR AUTHORITY
(Renewal Application)

ADDRESS CHANGES OR CORRECTIONS: Note if address was changed by Post Office, City, Town, Village or 911 Emergency Systems, please submit notice of authorization from appropriate agency.

Street address of premises to be licensed		Post office address of premises (if different)	
City, town or village - Zip Code	Telephone Number	City, town or village - Zip Code (if different)	
Landlord Name		Landlord Address	

1a. If you answered yes to Question 1, on the reverse, complete the appropriate schedule "A" or "B".

Use this schedule "A" to set forth details of arrests, summonses and/or convictions which have occurred since the signing of the application for the currently held license and have not been reported to the Authority or having been reported have not been acknowledged by the Authority. (If more space is needed, attach rider).

Name of Defendant	Connection with Business (Licensee, employee, patron or other)	Crime or Offense	Date	Disposition in Each case

1b. Use this schedule, "B" to set forth details of any outstanding loans and/or such "changes" (other than arrests, etc.) which have not been reported to the Authority or having been reported, have not been acknowledged by the Authority. (See instruction forms. If more space is needed, attach rider).

Nature of Change	Date	Details

NOTIFICATION RIDER TO RENEWAL APPLICATION

ON PREMISES LICENSEES ONLY MUST COMPLETE THIS SECTION

NOTICE TO MUNICIPALITY/COMMUNITY BOARD

You are required by the Alcoholic Beverage Control Law, Section 64, Subdivision 2a, upon receipt of a renewal application for a license to sell alcoholic beverages at retail for consumption on the premises, to promptly notify, in writing, the Clerk of the Village, Town or City wherein the premises are located of your application to the State Liquor Authority not less than thirty days prior to the submission of your application to the Authority. In the City of New York, such notification is to be sent to the community board with jurisdiction over the area in which the premises is located. Notification pursuant to this Section is to be sent by certified mail, return receipt requested. You must keep the certified mail receipt for your records.

CERTIFICATION RIDER TO APPLICATIONS

I hereby certify that I have complied with the requirements of Section 64, subdivision 2a of the Alcoholic Beverage Control Law, and have sent notification of my ~~renewal application to become licensed, by certified mail, return receipt requested~~ to the Clerk of the City, Town, Village (circle one) of _____, or, in New York City, the Clerk of Community Board # 5 Borough of Manhattan where the premises are located.

Fresco
Trade Name

34 EAST 52 STREET, NEW YORK, NY 10022
Address of Premises

Maria Scott
Signature

1027039
Serial Number

10/3/01
Date

NOTE: FAILURE TO NOTIFY THE APPROPRIATE MUNICIPALITY OR COMMUNITY BOARD AT LEAST THIRTY (30) DAYS PRIOR TO THE SUBMISSION OF YOUR APPLICATION OR RENEWAL MAY RESULT IN A DELAY IN PROCESSING YOUR APPLICATION.

You must keep the certified mail receipt for your records!

Bond Form L-9 Prescribed by
New York State Liquor Authority
November 1963

EXCISE BOND UNDERWRITERS

15 MAIDEN LANE, SUITE 800 • NEW YORK, N.Y. 10038

BOND IN SUPPORT OF APPLICATION FOR LICENSE OR
PERMIT UNDER THE NEW YORK ALCOHOLIC
BEVERAGE CONTROL LAW

LIQUOR

001--12

X-812868--00

BOND EXPIRES IN

OCTOBER, 2005

BOND NUMBER

Penal Sum of Bond

1,000.00 Plus Costs

KNOW ALL MEN BY THESE PRESENTS, that we,

Name of Applicant

STARJEM RESTAURANT INC.

Address of Place of Business

34 EAST 52ND STREET
A/K/A 485 MADISON AVENUE
NEW YORK NY 10022

In the county of NEW YORK State of NEW YORK as Principal, and
having an office and usual place of business at

FIDELITY & DEPOSIT CO OF MARYLAND
111 JOHN ST.
NEW YORK NY 10038

a surety company approved by the Superintendent of Insurance of New York State as to solvency and responsibility and authorized to transact business in New York State, as Surety, are held and firmly bound unto the People of the State of New York in the penal sum set forth above and for the payment of any costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1,000.00) for the payment of which sum or sums, well and truly to be made, we, the said principal and surety, bind ourselves, successors, and assigns, respectively, jointly and severally, firmly by these presents.

WHEREAS, the above bounden principal is making application to the New York State Liquor Authority, for a license or permit under the Alcoholic Beverage Control Law and the said State Liquor Authority, by Part 81 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the Authority), having required the principal to file with it a bond to the People of the State of New York, as provided in said Law aforesaid.

NOW, THEREFORE, the conditions of this obligation are such that if the said license or permit applied for, which expires on the date designated in said license or permit, is granted to the said principal and the principal will not, during the license or permit period, suffer or permit any violation of the provisions of the Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or give cause as provided in the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the State Liquor Authority), for the cancellation, revocation or suspension of said license or permit or the issuance of an order of warning, and will pay all fines and penalties which shall accrue thereunder, together with all costs taxed or allowed in any action or proceeding brought or instituted for a violation of any of the provisions of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or for cause for the cancellation, revocation or suspension or issuance of an order of warning as provided in the Alcoholic Beverage Control Law or Rules of the Authority, or costs taxed or allowed in any review pursuant to Section 121 of the Alcoholic Beverage Control Law; then this obligation shall be void; otherwise to remain in full force and effect; subject, however, to the conditions stated on reverse side.

IN WITNESS WHEREOF the parties hereto have caused these presents to be signed and sealed this 3 day of October

2003

STARJEM RESTAURANT INC. L.S.
Principal

BY:

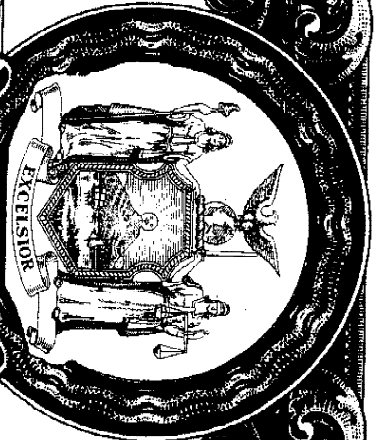
Marion Scott

FIDELITY & DEPOSIT CO OF MARYLAND

111 JOHN ST.

ON-PREMISES LIQUOR LICENSE

2005 1 NEW OP 6650 252



LICENSE EFFECTIVE 11/01/2003

LICENSE EXPIRES 10/31/2005

NEW YORK STATE LIQUOR AUTHORITY

THE LICENSEE DESIGNATED BELOW IS HEREBY GRANTED PERMISSION, UNDER THE ALCOHOLIC BEVERAGE CONTROL LAW TO TRAFFIC IN ALCOHOLIC BEVERAGES PURSUANT TO THE TYPE OF LICENSE INDICATED IN THE UPPER LEFT HAND CORNER OF THIS CERTIFICATE AND ACCORDING TO THE STATUTES AND REGULATIONS PERTAINING THERETO.

THIS LICENSE SHALL NOT BE TRANSFERABLE TO ANY OTHER PERSON OR TO ANY OTHER PREMISES OR TO ANY OTHER PART OF THE BUILDING CONTAINING SUCH LICENSED PREMISES. IT SHALL NOT BE DEEMED A PROPERTY OR VESTED RIGHT AND MAY BE REVOKED AT ANY TIME PURSUANT TO LAW.

SERIAL 1027039

COUNTY NEW YORK

CERTIFICATE NUMBER 625295

FILING FEE \$90.00

LICENSE FEE \$4,352.00

CYCICAL CREDIT GROUP 2

STARJEM RESTAURANT INC

34 E 52ND STREET

NEW YORK NY 10022

Edward F. Kelly
Edward F. Kelly
CHAIRMAN

BEFORE COMMENCING OR DOING ANY BUSINESS FOR THE TIME FOR WHICH THIS LICENSE HAS BEEN ISSUED, THE SAID LICENSEE SHALL BE ENCLOSED IN A SUITABLE WOOD OR METAL FRAME, HAVING A CLEAR GLASS SPACE AND A SUBSTANTIAL WOOD OR METAL BACK SO THAT THE WHOLE OF SAID LICENSE MAY BE SEEN THEREIN, AND SHALL BE POSTED UP AND AT ALL TIMES DISPLAYED IN A CONSPICUOUS PLACE IN THE ROOM WHERE SUCH BUSINESS IS CARRIED ON, SO THAT ALL PERSONS VISITING SUCH PLACE MAY READILY SEE THE SAME.

SLA FORM 180-033 (11/99)

Certificate No. 6625295

STATE OF NEW YORK - LIQUOR AUTHORITY
Renewal Application (Directions for Completion enclosed)

License fee: 4,352.00
Filing fee: 90.00
Total fee due: 4,442.00

New effective date: 11/01/2005
New expiration date: 10/31/2007

SPECIAL MAILING REQUEST: Complete if you want your license mailed to an address other than the licensed premises address:

STARJEM RESTAURANT INC

34 E 52ND STREET AKA 485 MADISON AVENUE
NEW YORK, NY 10022

RECEIVED SEP 26 2005

NEW SERIAL#: 1027039 OLD SERIAL#: 051NEWOP0006650252
34 E 52ND STREET NEW YORK, NY 10022

(Premise address)

Make sure all names and address information is correct, if not make the necessary changes on the reverse side.

ALL QUESTIONS MUST BE ANSWERED.

Any false answer or statement made by the applicant constitutes perjury and will subject any license hereunder to revocation.

- If any changes in facts have occurred since the signing of the application for your currently held license which have not been reported to and acknowledged by the State Liquor Authority check "YES" and set forth details of changes in facts in the appropriate **schedules A and/or B** on the reverse side. If no changes in facts have occurred, check "NO".

	YES	NO
1.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
- State whether said licensed business presently is regularly kept open and operated by the licensee. If no, submit statement with explanation.

2.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
----	-------------------------------------	--------------------------
- If your premises are closed, state whether your license certificate is deposited in safekeeping with the appropriate zone office of the NYS Liquor Authority.

3.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> Not Applicable
----	--------------------------	--------------------------	--

APPLICANT UNDERSTANDS THAT ANY CHANGE IN ANY OF THE FACTS REPORTED HEREIN WHICH OCCURS BETWEEN THE SIGNING OF THIS APPLICATION AND THE COMMENCEMENT OF THE NEW LICENSE PERIOD MUST BE REPORTED TO THE AUTHORITY IN WRITING BY CERTIFIED OR REGISTERED MAIL WITHIN 48 HOURS. ANY CHANGE OF FACTS OCCURRING AFTER THE COMMENCEMENT OF THE NEW LICENSE PERIOD MUST BE REPORTED WITHIN 10 DAYS. THE FAILURE TO COMPLY WITH THE FOREGOING IS A GROUND FOR THE REVOCATION, CANCELLATION OR SUSPENSION OF THE LICENSE.

APPLICANT HEREBY AGREES THAT ANY APPLICATION FILED UNDER THE ALCOHOLIC BEVERAGE CONTROL LAW BY ANY PERSON HAVING ANY INTEREST, DIRECT OR INDIRECT, EITHER IN THE PREMISES OR IN THE BUSINESS TO BE LICENSED, FOR ANY LICENSE OR PERMIT, SHALL BE DEEMED AND MADE A PART HEREOF AND CONSIDERED BY THE STATE LIQUOR AUTHORITY IN ACTING UPON THIS APPLICATION.

THIS CERTIFICATION MUST BE SIGNED and DATED by INDIVIDUAL APPLICANT and EACH MEMBER of A PARTNERSHIP

INDIVIDUAL APPLICANTS AND EACH MEMBER OF A PARTNERSHIP COMPLETE THIS SECTION.

The undersigned, each for himself, certifies that he is the applicant above named; that he knows the contents of the above application and the statements contained therein, that the same are true of his own knowledge, that he has complied and will continue to comply with all conditions upon which the original license was issued; that no physical changes have been made to the licensed premises since the issuance of the original license, except those authorized by the State Liquor Authority; and represents that all statements made in the original application for this license and in any and all applications for renewal thereof are true and correct, except as modified in subsequent renewal applications or as otherwise reported to and acknowledged or approved by the Authority.

Date _____

(Signature of licensee(s))

(Home Address)

(Home Telephone)

THIS CERTIFICATION TO BE SIGNED AND DATED BY A CORPORATION OR A CLUB

CORPORATE OFFICER OR CLUB ALCOHOLIC BEVERAGE CONTROL (ABC) OFFICER COMPLETE THIS SECTION

MARION SCOTTO

certifies that he is

PRESIDENT

(Print Name of Corporate Officer)

(Print Title of Corporate Officer)

of the above named applicant corporation; that he knows the contents of the above application and the statements and answers therein, that the same are true of his own knowledge; that he has been authorized by order of the Board of Directors of said applicant corporation to make the statements and answers in this application in behalf of said applicant corporation with the same force and effect as if said corporation made such statements and answers itself; that it has complied and will continue to comply with all conditions upon which the original license was issued; that no physical changes have been made to the licensed premises since the issuance of the original license, except those authorized by the State Liquor Authority; and represents that all statements made in the original application for this license and in any and all applications for renewal thereof are true and correct, except as modified in subsequent renewal applications or as otherwise reported to and acknowledged or approved by the Authority.

Date SEPTEMBER 16, 2005

(Signature of authorized officer)

350 EAST 72 STREET
NEW YORK, NY 10021 212-472-4466

(Home Address and Home Telephone)

DATE

APPROVED

DISAPPROVED

S.L.A. BY

STATE OF NEW YORK - LIQUOR AUTHORITY
(Renewal Application)

ADDRESS CHANGES OR CORRECTIONS: Note if physical address of premises was changed by Post Office, City, Town, Village, 911 Emergency Systems, or 911 address reassignment, please submit notice of authorization from appropriate agency.

Street address of premises to be licensed		Post office address of premises (If different)	
City, town or village - Zip Code	Telephone Number	City, town or village - Zip Code (If different)	
Landlord Name		Landlord Address	

1a. If you answered yes to Question 1, on the reverse, complete the appropriate schedule "A" or "B".

Use this schedule "A" to set forth details of arrests, summonses and/or convictions which have occurred since the signing of the application for the currently held license and have not been reported to the Authority or having been reported have not been acknowledged by the Authority. (If more space is needed, attach rider).

Name of Defendant	Connection with Business (Licensee, employee, patron or other)	Crime or Offense	Date	Disposition in Each case (submit copy)

1b. **Use this schedule, "B" to set forth details of any outstanding loans and/or such "changes" (other than arrests, etc.) which have not been reported to the Authority or having been reported, have not been acknowledged by the Authority. (See instruction forms. If more space is needed, attach rider).**

Nature of Change	Date	Details

NOTIFICATION RIDER TO RENEWAL APPLICATION

ON PREMISES LICENSEES ONLY MUST COMPLETE THIS SECTION

NOTICE TO MUNICIPALITY/COMMUNITY BOARD

You are required by the Alcoholic Beverage Control Law, Section 64, Subdivision 2a, upon receipt of a renewal application for a license to sell alcoholic beverages at retail for consumption on the premises, to promptly notify, in writing, the Clerk of the Village, Town or City wherein the premises are located of your application to the State Liquor Authority not less than thirty days prior to the submission of your application to the Authority. In the City of New York, such notification is to be sent to the community board with jurisdiction over the area in which the premises is located. Notification pursuant to this Section is to be sent by certified mail, return receipt requested. **You must keep the certified mail receipt for your records.**

CERTIFICATION RIDER TO APPLICATIONS

I hereby certify that I have complied with the requirements of Section 64, subdivision 2a of the Alcoholic Beverage Control Law, and have sent notification of my renewal application to become licensed, **by certified mail, return receipt requested** to the Clerk of the City, Town, Village (circle one) of _____ or, in New York City, the Clerk of Community Board # _____ Borough of _____ where the premises are located.

Trade Name FRESCA

Address of Premises 34 EAST 52ND STREET, NEW YORK, NY 10022

Signature Marion Scott Serial Number 1027039 Date 9/16/05

NOTE: FAILURE TO NOTIFY THE APPROPRIATE MUNICIPALITY OR COMMUNITY BOARD AT LEAST THIRTY (30) DAYS PRIOR TO THE SUBMISSION OF YOUR APPLICATION OR RENEWAL MAY RESULT IN A DELAY IN PROCESSING YOUR APPLICATION.

You must keep the certified mail receipt for your records!

EXCISE BOND UNDERWRITERS

15 MAIDEN LANE, SUITE 800 • NEW YORK, N.Y. 10038

BOND IN SUPPORT OF APPLICATION FOR LICENSE OR
PERMIT UNDER THE NEW YORK ALCOHOLIC
BEVERAGE CONTROL LAW

LIQUOR

BOND EXPIRES IN

BOND NUMBER

001--20

X-B12868--00

Penal Sum of Bond

OCTOBER, 2007

KNOW ALL MEN BY THESE PRESENTS, that we,

1,000.00 Plus Costs

Name of Applicant

Address of Place of Business

STARJEM RESTAURANT INC.

34 EAST 52ND STREET
A/K/A 485 MADISON AVENUE
NEW YORK NY 10022

n the county of NEW YORK State of NEW YORK as Principal, and
having an office and usual place of business at

THE HANOVER INSURANCE COMPANY
330 SOUTH RANDOLPHVILLE ROAD
PISCATAWAY NJ 08854

a surety company approved by the Superintendent of Insurance of New York State as to solvency and responsibility and authorized to transact business in New York State, as Surety, are held and firmly bound unto the People of the State of New York in the penal sum set forth above and for the payment of any costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1,000.00) for the payment of which sum or sums, well and truly to be made, we, the said principal and surety, bind ourselves, successors, and assigns, respectively, jointly and severally, firmly by these presents.

WHEREAS, the above bounden principal is making application to the New York State Liquor Authority, for a license or permit under the Alcoholic Beverage Control Law and the said State Liquor Authority, by Part 81 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the Authority), having required the principal to file with it a bond to the People of the State of New York, as provided in said Law aforesaid.

NOW, THEREFORE, the conditions of this obligation are such that if the said license or permit applied for, which expires on the date designated in said license or permit, is granted to the said principal and the principal will not, during the license or permit period, suffer or permit any violation of the provisions of the Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or give cause as provided in the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the State Liquor Authority), for the cancellation, revocation or suspension of said license or permit or the issuance of an order of warning, and will pay all fines and penalties which shall accrue thereunder, together with all costs taxed or allowed in any action or proceeding brought or instituted for a violation of any of the provisions of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or for cause for the cancellation, revocation or suspension or issuance of an order of warning as provided in the Alcoholic Beverage Control Law or Rules of the Authority, or costs taxed or allowed in any review pursuant to Section 121 of the Alcoholic Beverage Control Law; then this obligation shall be void; otherwise to remain in full force and effect; subject, however, to the conditions stated on reverse side.

IN WITNESS WHEREOF the parties hereto have caused these presents to be signed and sealed this 16 day of SEPTEMBER,

2005

STARJEM RESTAURANT INC

Principal

L.S.

BY:

Marion Scott

THE HANOVER INSURANCE COMPANY

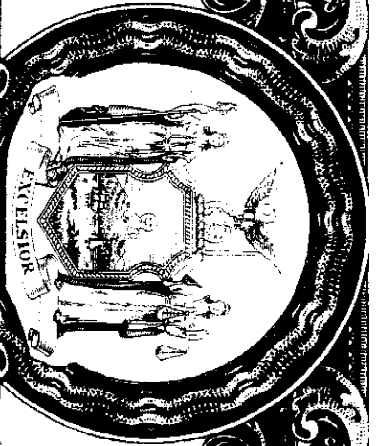
↑
APPLICANT MUST SIGN HERE

John L. Corneau
Attorney-in-fact

(OVER)

ON-PREMISES LIQUOR LICENSE

2007 1 NEW OP 6650 252



LICENSE EFFECTIVE 11/01/2005

LICENSE EXPIRES 10/31/2007

NEW YORK STATE LIQUOR AUTHORITY

THE LICENSEE DESIGNATED BELOW IS HEREBY GRANTED PERMISSION, UNDER THE ALCOHOLIC BEVERAGE CONTROL LAW TO TRAFFIC IN ALCOHOLIC BEVERAGES PURSUANT TO THE TYPE OF LICENSE INDICATED IN THE UPPER LEFT HAND CORNER OF THIS CERTIFICATE AND ACCORDING TO THE STATUTES AND REGULATIONS PERTAINING THERETO.

THIS LICENSE SHALL NOT BE TRANSFERABLE TO ANY OTHER PERSON OR TO ANY OTHER PREMISES OR TO ANY OTHER PART OF THE BUILDING CONTAINING SUCH LICENSED PREMISES. IT SHALL NOT BE DEEMED A PROPERTY OR VESTED RIGHT AND MAY BE REVOKED AT ANY TIME PURSUANT TO LAW

SERIAL 1027039
COUNTY NEW YORK
CERTIFICATE NUMBER 680060

FILING FEE \$90.00
LICENSE FEE \$4,352.00

STARJEM RESTAURANT INC

34 E 52ND STREET
NEW YORK NY 10022

Edward F. Kelly
CHAIRMAN

BEFORE COMMENCING OR DOING ANY BUSINESS FOR THE TIME FOR WHICH THIS LICENSE HAS BEEN ISSUED, THE SAID LICENSEE SHALL BE ENCLOSED IN A SUITABLE WOOD OR METAL FRAME, HAVING A CLEAR GLASS SPACE AND A SUBSTANTIAL WOOD OR METAL BACK SO THAT THE WHOLE OF SAID LICENSE MAY BE SEEN THEREIN, AND SHALL BE POSTED UP AND AT ALL TIMES DISPLAYED IN A CONSPICUOUS PLACE IN THE ROOM WHERE SUCH BUSINESS IS CARRIED ON, SO THAT ALL PERSONS VISITING SUCH PLACE MAY READILY SEE THE SAME.

SIA FORM 180-033 (11/99)

Certificate No. 6680060

STATE OF NEW YORK - LIQUOR AUTHORITY
Renewal Application (Directions for Completion enclosed)

License fee: 4,352.00
Filing fee: 90.00
Total fee due: 4,442.00

New effective date: 11/01/2007
New expiration date: 10/31/2009

STARJEM RESTAURANT INC

34 E 52ND STREET AKA 485 MADISON AVENUE
NEW YORK, NY 10022

NEW SERIAL#: 1027039 OLD SERIAL#: 071NEWOP0006650252
34 E 52ND STREET NEW YORK, NY 10022

(Premise address)

Make sure all names and address information is correct. If not make the necessary changes on the reverse side.

SPECIAL MAILING REQUEST: Complete if you want your license mailed to an address other than the licensed premises address:

342363

RECEIVED OCT 15 2007

9/12/07

ALL QUESTIONS MUST BE ANSWERED.

Any false answer or statement made by the applicant constitutes perjury and will subject any license hereunder to revocation.

- If any changes in facts have occurred since the signing of the application for your currently held license which have not been reported to and acknowledged by the State Liquor Authority check "YES" and set forth details of changes in facts in the appropriate **schedules A and/or B** on the reverse side. If no changes in facts have occurred, check "NO".

	YES	NO
1.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
- State whether said licensed business presently is regularly kept open and operated by the licensee. If no, submit statement with explanation.

2.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		Not Applicable
- If your premises are closed, state whether your license certificate is deposited in safekeeping with the appropriate zone office of the NYS Liquor Authority.

3.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
----	--------------------------	--------------------------	-------------------------------------

APPLICANT UNDERSTANDS THAT ANY CHANGE IN ANY OF THE FACTS REPORTED HEREIN WHICH OCCURS BETWEEN THE SIGNING OF THIS APPLICATION AND THE COMMENCEMENT OF THE NEW LICENSE PERIOD MUST BE REPORTED TO THE AUTHORITY IN WRITING BY CERTIFIED OR REGISTERED MAIL WITHIN 48 HOURS. ANY CHANGE OF FACTS OCCURRING AFTER THE COMMENCEMENT OF THE NEW LICENSE PERIOD MUST BE REPORTED WITHIN 10 DAYS. THE FAILURE TO COMPLY WITH THE FOREGOING IS A GROUND FOR THE REVOCATION, CANCELLATION OR SUSPENSION OF THE LICENSE.

THIS CERTIFICATION MUST BE SIGNED and DATED by INDIVIDUAL APPLICANT and EACH MEMBER of A PARTNERSHIP

INDIVIDUAL APPLICANTS AND EACH MEMBER OF A PARTNERSHIP COMPLETE THIS SECTION.

The undersigned, each for himself, certifies that he is the applicant above named; that he knows the contents of the above application and the statements contained therein, that the same are true of his own knowledge, that he has complied and will continue to comply with all conditions upon which the original license was issued; that no physical changes have been made to the licensed premises since the issuance of the original license, except those authorized by the State Liquor Authority; and represents that all statements made in the original application for this license and in any and all applications for renewal thereof are true and correct, except as modified in subsequent renewal applications or as otherwise reported to and acknowledged or approved by the Authority.

_____ (Print name of licensee(s))	_____ Date
_____ (Signature of licensee(s))	_____ (Home Address)
	_____ (Home Telephone)

THIS CERTIFICATION TO BE SIGNED AND DATED BY A CORPORATION OR A CLUB

CORPORATE OFFICER OR CLUB ALCOHOLIC BEVERAGE CONTROL (ABC) OFFICER COMPLETE THIS SECTION

MARION SCOTTO certifies that he is PRESIDENT
(Print Name of Corporate Officer) (Print Title of Corporate Officer)
of the above named applicant corporation; that he knows the contents of the above application and the statements and answers therein, that the same are true of his own knowledge; that he has been authorized by order of the Board of Directors of said applicant corporation to make the statements and answers in this application in behalf of said applicant corporation with the same force and effect as if said corporation made such statements and answers itself; that it has complied and will continue to comply with all conditions upon which the original license was issued; that no physical changes have been made to the licensed premises since the issuance of the original license, except those authorized by the State Liquor Authority; and represents that all statements made in the original application for this license and in any and all applications for renewal thereof are true and correct, except as modified in subsequent renewal applications or as otherwise reported to and acknowledged or approved by the Authority.

<u>Marion Scott</u> (Signature of authorized officer)	Date <u>OCTOBER 10, 2007</u>
	<u>350 EAST 72ND STREET</u> <u>NEW YORK, NEW YORK 10021 (212) 472-4466</u> (Home Address and Home Telephone)

STATE OF NEW YORK - LIQUOR AUTHORITY
(Renewal Application)

ADDRESS CHANGES OR CORRECTIONS: Note If physical address of premises was changed by Post Office, City, Town, Village, 911 Emergency Systems, or 911 address reassignment, please submit notice of authorization from appropriate agency.

Street address of premises to be licensed		Post office address of premises (If different)	
City, town or village - Zip Code	Telephone Number	City, town or village - Zip Code (If different)	
Landlord Name		Landlord Address	

1a. If you answered yes to Question 1, on the reverse, complete the appropriate schedule "A" or "B".

Use this schedule "A" to set forth details of arrests, summonses and/or convictions which have occurred since the signing of the application for the currently held license and have not been reported to the Authority or having been reported have not been acknowledged by the Authority. Submit copy of Certificate of Disposition or Police Report.

Name of Defendant	Connection with Business (Licensee, employee, patron or other)	Crime or Offense	Date	Disposition in Each case (submit copy)

1b. **Use this schedule, "B" to set forth details of any outstanding loans and/or such "changes" (other than arrests, etc.) which have not been reported to the Authority or having been reported, have not been acknowledged by the Authority. (See instruction forms. If more space is needed, attach rider).**

Nature of Change	Date	Details

NOTIFICATION RIDER TO RENEWAL APPLICATION

ON PREMISES LICENSEES ONLY MUST COMPLETE THIS SECTION

NOTICE TO MUNICIPALITY/COMMUNITY BOARD

You are required by the Alcoholic Beverage Control Law, Section 64, Subdivision 2a, upon receipt of a renewal application for a license to sell alcoholic beverages at retail for consumption on the premises, to promptly notify, in writing, the Clerk of the Village, Town or City, wherein the premises are located, of your application to the State Liquor Authority **NOT LESS THAN THIRTY DAYS PRIOR TO THE SUBMISSION OF YOUR APPLICATION TO THE AUTHORITY**. In the City of New York, such notification is to be sent to the community board with jurisdiction over the area in which the premise is located. **Notification pursuant to this Section is to be sent by certified mail, return receipt requested.** You must submit proof with your renewal application that you have sent the notification to your municipality.

ACCEPTABLE PROOF CONSISTS OF:

1. A copy of the letter sent to the municipality and either the original or a copy of the certified mail receipt card; OR
2. The original or a copy of the letter sent to the municipality, date stamped and signed by the municipality showing receipt.

CERTIFICATION RIDER TO APPLICATIONS

I hereby certify that I have complied with the requirements of Section 64, subdivision 2a of the Alcoholic Beverage Control Law, and have sent notification of my renewal application to become licensed, by certified mail, return receipt requested to the Clerk of the (CIRCLE ONE) City, Town, Village of _____ OR, in New York City, the Clerk of Community Board # 5 Borough of MANHATTAN where the premises are located.

FRESCA
Trade Name

34 EAST 52ND STREET, NEW YORK, NEW YORK 10022
Address of Premises

Marion Scott 1027039 OCTOBER 10, 2007
Signature New Serial Number Date



EXCISE BOND UNDERWRITERS

15 MAIDEN LANE, SUITE 800 • NEW YORK, N.Y. 10038

Bond Form L-9 Prescribed by
New York State Liquor Authority
November 1963

BOND IN SUPPORT OF APPLICATION FOR LICENSE OR
PERMIT UNDER THE NEW YORK ALCOHOLIC
BEVERAGE CONTROL LAW

LIQUOR

BOND EXPIRES IN

BOND NUMBER

001--20

X-B12868--00

OCTOBER, 2009

Penal Sum of Bond

1,000.00

Plus Costs

KNOW ALL MEN BY THESE PRESENTS, that we,

Name of Applicant

Address of Place of Business

STARJEM RESTAURANT INC.

34 EAST 52ND STREET
A/K/A 485 MADISON AVENUE
NEW YORK NY 10022

In the county of NEW YORK State of NEW YORK as Principal, and
having an office and usual place of business at

THE HANOVER INSURANCE COMPANY
330 SOUTH RANDOLPHVILLE ROAD
PISCATAWAY NJ 08854

a surety company approved by the Superintendent of Insurance of New York State as to solvency and responsibility and authorized to transact business in New York State, as Surety, are held and firmly bound unto the People of the State of New York in the penal sum set forth above and for the payment of any costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1,000.00) for the payment of which sum or sums, well and truly to be made, we, the said principal and surety, bind ourselves, successors, and assigns, respectively, jointly and severally, firmly by these presents.

WHEREAS, the above bounden principal is making application to the New York State Liquor Authority, for a license or permit under the Alcoholic Beverage Control Law and the said State Liquor Authority, by Part 81 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the Authority), having required the principal to file with it a bond to the People of the State of New York, as provided in said Law aforesaid.

NOW, THEREFORE, the conditions of this obligation are such that if the said license or permit applied for, which expires on the date designated in said license or permit, is granted to the said principal and the principal will not, during the license or permit period, suffer or permit any violation of the provisions of the Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or give cause as provided in the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the State Liquor Authority), for the cancellation, revocation or suspension of said license or permit or the issuance of an order of warning, and will pay all fines and penalties which shall accrue thereunder, together with all costs taxed or allowed in any action or proceeding brought or instituted for a violation of any of the provisions of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or for cause for the cancellation, revocation or suspension or issuance of an order of warning as provided in the Alcoholic Beverage Control Law or Rules of the Authority, or costs taxed or allowed in any review pursuant to Section 121 of the Alcoholic Beverage Control Law; then this obligation shall be void; otherwise to remain in full force and effect; subject, however, to the conditions stated on reverse side.

IN WITNESS WHEREOF the parties hereto have caused these presents to be signed and sealed this 10th day of OCTOBER,

2007

STARJEM RESTAURANT INC. L.S.
Principal
BY: Marion Scotto

THE HANOVER INSURANCE COMPANY

↑
APPLICANT MUST SIGN HERE

John L. Corneau
Attorney-in-fact

(OVER)

BOND IN SUPPORT OF APPLICATION FOR LICENSE OR PERMIT
UNDER THE NEW YORK ALCOHOLIC BEVERAGE CONTROL LAW

CONDITIONS

1. An action for the breach of any condition of this bond may be maintained without previous conviction or prosecution for the violation of any provision of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by the State Liquor Authority, or for cause as provided by the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the Authority).
2. The aggregate liability of the surety on account of any and all defaults hereunder shall in no event exceed the penal sum of this bond plus costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1000.00).
3. Upon the payment of any loss arising under this bond, the surety shall be subrogated to the rights and remedies of the obligee against the principal to recover from the principal any amount so paid.
4. Any action brought for the penal sum of this bond shall be commenced within twenty-four months after the expiration of the license or permit period aforementioned, or for costs within one year after final disposition of any action or proceeding. In the event of the institution of any action or proceeding to review the Authority's determination, the period of 24 months shall not commence until the final determination of the proceeding or litigation.
5. This bond shall be effective during the time the aforementioned license or permit shall be in effect and during any extension thereof.
6. A breach of any condition of this bond shall be deemed to have been established by the revocation, cancellation or suspension of the aforesaid license or permit or the issuance of an order of warning by the State Liquor Authority unless said revocation, cancellation, suspension or order of warning shall have been reversed or annulled by a Court of competent jurisdiction.
7. In any action or proceeding to recover on this bond, the principal and the company named herein as Surety waive any defense based upon any defect in the bond, including, but not limited to, an erroneous, improper or defective insertion or omission to insert or apparent alteration of the expiration year and/or amount of the penal sum of the bond and further waive any objection that the bond bears a printed, typewritten or facsimile signature. Any bond filed with the State Liquor Authority shall be admissible in evidence in any court on application of the State Liquor Authority or People of the State of New York without further proof of due execution thereof by or on behalf of the principal and surety and shall be conclusively presumed to have been duly executed by and on behalf of the principal and surety. Any bond filed with the State Liquor Authority and bearing the printed or facsimile name of the surety or the typewritten or facsimile signature of its representative shall be conclusively presumed to be the duly issued bond of the surety company and binding on it, its successors and assigns for the amount specified in Part 81 of Subtitle B of Title 9 of the Official Compilation of Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the State Liquor Authority).



STATE OF NEW YORK

NOTICE OF APPEARANCE

Section 166 of the Executive Law requires a regulatory agency to maintain for public inspection, a record of who appears before it for a fee as a third party (i.e., an attorney, an agent, lobbyist*, or representative) on behalf of a person or organization subject to the regulatory jurisdiction of the agency. This usually occurs when the third party's client is involved in an enforcement, formal permit, or application matter. *This form is subject to all the rules and regulations of the Freedom of Information Law. Information that is confidential as a matter of law need not be furnished.*

Agency: State Liquor Authority Date: October 10, 2007

Division/Bureau: _____

1. Name of individual appearing: Robert V. Ferrari

Address: 630 Third Avenue, 16th Floor, New York, New York 10017

Telephone: (212) 972-7040

2. Client represented: Starjem Restaurant Inc.

Address: 34 East 52nd Street aka 485 Madison Avenue, New York, New York 10022

Telephone: (212) 935-3434

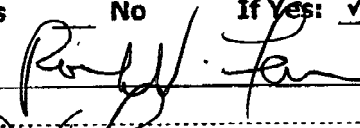
3. Subject of appearance: ☒ Regulatory/Enforcement ☐ Lobbying

4. Acting in capacity of:

☒ Attorney ☐ Lobbyist

☐ Agent ☐ Other (describe) _____

5. Are you being compensated? ☒ Yes ☐ No If Yes: ☒ Fee ☐ Salary

6. Signature of individual appearing: 

7. Agency official (print name): 

Signature: _____

*A LOBBYIST is a person or organization, other than a New York State government employee acting in an official capacity, who appears for the purpose of influencing the adoption or rejection of proposed rules, regulations, rates or legislation, including the State budget. An "appearance" for lobbying purposes can be a personal visit, letter, telephone call, conversation at a meeting, or any other type of contact, but does not include "on the record" proceedings or hearings.

ROBERT V. FERRARI

ATTORNEY AT LAW

630 THIRD AVENUE, NEW YORK, N.Y. 10017

(212) 972-7040

TELECOPIER (212) 922-1939

E-MAIL: rvf@rvferrari.com

RICHARD H. BYRNES

September 12, 2007

Community Board #5
450 Seventh Avenue
Suite 2109
New York, New York 10123

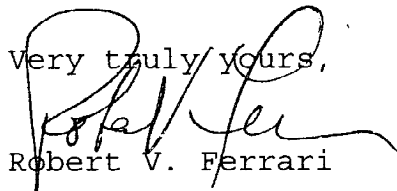
Re: Starjem Restaraunt Inc.
34 East 52nd AKA 485 Madison Avenue
New York, New York 10022

Dear Sir/Madam:

This is to advise that the above restaurant is
applying to the New York State Liquor Authority to renew
its on premises liquor license.

Notice is hereby given pursuant to the Alcoholic Beverage
Control Law.

Very truly yours,


Robert V. Ferrari

Via Certified Mail,
Return Receipt Requested

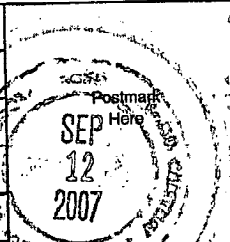
7006 2760 0001 5169 9643

U.S. Postal Service[®]
CERTIFIED MAIL[™] RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com.

OFFICIAL USE

Postage	\$.41
Certified Fee	2.65
Return Receipt Fee (Endorsement Required)	2.15
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.21



Sent To

COMMUNITY BOARD NO. 5

Street, Apt. No.,

or PO Box No. 450 SEVENTH AVENUE, SUITE 2109

City, State, ZIP+4

NEW YORK, NEW YORK 10123

PS Form 3800, August 2006

See Reverse for Instructions

ON-PREMISES LIQUOR LICENSE

2009 1 NEW OP 6650 252



LICENSE EFFECTIVE 11/01/2007

LICENSE EXPIRES 10/31/2009

NEW YORK STATE LIQUOR AUTHORITY

THE LICENSEE DESIGNATED BELOW IS HEREBY GRANTED PERMISSION, UNDER THE ALCOHOLIC BEVERAGE CONTROL LAW TO TRAFFIC IN ALCOHOLIC BEVERAGES PURSUANT TO THE TYPE OF LICENSE INDICATED IN THE UPPER LEFT HAND CORNER OF THIS CERTIFICATE AND ACCORDING TO THE STATUTES AND REGULATIONS PERTAINING THERETO.

THIS LICENSE SHALL NOT BE TRANSFERABLE TO ANY OTHER PERSON OR TO ANY OTHER PREMISES OR TO ANY OTHER PART OF THE BUILDING CONTAINING SUCH LICENSED PREMISES. IT SHALL NOT BE DEEMED A PROPERTY OR VESTED RIGHT AND MAY BE REVOKED AT ANY TIME PURSUANT TO LAW.

SERIAL 1027039
COUNTY NEW YORK
CERTIFICATE NUMBER 740519

FILING FEE \$90.00
LICENSE FEE \$4,352.00

STARJEM RESTAURANT INC

34 E 52ND STREET
NEW YORK NY 10022

Daniel B. Boyle
Chairman

BEFORE COMMENCING OR DOING ANY BUSINESS FOR THE TIME FOR WHICH THIS LICENSE HAS BEEN ISSUED, THE SAID LICENSE SHALL BE ENCLOSED IN A SUITABLE WOOD OR METAL FRAME, HAVING A CLEAR GLASS SPACE AND A SUBSTANTIAL WOOD OR METAL BACK SO THAT THE WHOLE OF SAID LICENSE MAY BE SEEN THEREIN, AND SHALL BE POSTED UP AND AT ALL TIMES DISPLAYED IN A CONSPICUOUS PLACE IN THE ROOM WHEREF SUCH BUSINESS IS CARRIED ON, SO THAT ALL PERSONS VISITING SUCH PLACE MAY READILY SEE THE SAME.

SLA FORM 180-033 (11/89)

Certificate No. **G740519**

STATE OF NEW YORK - LIQUOR AUTHORITY
 Renewal Application (Directions for Completion enclosed)

License fee: 4,352.00
 Filing fee: 90.00
 Total fee due: 4,442.00

New effective date: 11/01/2009
 New expiration date: 10/31/2011

RECEIVED OCT 15 2009
450121

SPECIAL MAILING REQUEST: Complete if you want your license mailed to an address other than the licensed premises address:

STARJEM RESTAURANT INC

34 E 52ND STREET AKA 485 MADISON AVENUE
 NEW YORK, NY 10022

NEW SERIAL#: 1027039 OLD SERIAL#: 091NEWOP0006650252
 34 E 52ND STREET NEW YORK, NY 10022

(Premise address)

Make sure all names and address information is correct, if not make the necessary changes on the reverse side.

9/18

APPROVED METHOD OF OPERATION

METHOD OF OPERATION:

DAYS/HOURS OF OPERATION:

ADDITIONAL INFORMATION:

ANY CHANGE TO THE APPROVED METHOD OF OPERATION MUST BE APPROVED BY THE AUTHORITY PRIOR TO IMPLEMENTING SUCH CHANGE. CONTACT YOUR ZONE OFFICE TO OBTAIN THE APPROPRIATE FORM TO MAKE ANY CHANGES.

ALL QUESTIONS MUST BE ANSWERED.

Any false answer or statement made by the applicant constitutes perjury and will subject any license hereunder to revocation.

- | | |
|--|--|
| 1. If any changes in facts have occurred since the signing of the application for your currently held license which have not been reported to and acknowledged by the State Liquor Authority check "YES" and set forth details of changes in facts in the appropriate schedules A and/or B on the reverse side. If no changes in facts have occurred, check "NO". | YES NO |
| | 1. <input type="checkbox"/> <input checked="" type="checkbox"/> |
| 2. State whether said licensed business presently is regularly kept open and operated by the licensee. If no, submit statement with explanation. | 2. <input checked="" type="checkbox"/> <input type="checkbox"/> |
| 3. If your premises are closed, state whether your license certificate is deposited in safekeeping with the appropriate zone office of the NYS Liquor Authority. | 3. <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> |

Not Applicable

APPLICANT UNDERSTANDS THAT ANY CHANGE IN ANY OF THE FACTS REPORTED HEREIN WHICH OCCURS BETWEEN THE SIGNING OF THIS APPLICATION AND THE COMMENCEMENT OF THE NEW LICENSE PERIOD MUST BE REPORTED TO THE AUTHORITY IN WRITING BY CERTIFIED OR REGISTERED MAIL WITHIN 48 HOURS. ANY CHANGE OF FACTS OCCURRING AFTER THE COMMENCEMENT OF THE NEW LICENSE PERIOD MUST BE REPORTED WITHIN 10 DAYS. THE FAILURE TO COMPLY WITH THE FOREGOING IS A GROUND FOR THE REVOCATION, CANCELLATION OR SUSPENSION OF THE LICENSE.

**THIS CERTIFICATION MUST BE SIGNED AND DATED BY INDIVIDUAL APPLICANT and EACH MEMBER OF A PARTNERSHIP
 INDIVIDUAL APPLICANTS AND EACH MEMBER OF A PARTNERSHIP COMPLETE THIS SECTION.**

The undersigned, each for himself, certifies that he is the applicant above named; that he knows the contents of the above application and the statements contained therein, that the same are true of his own knowledge, that he has complied and will continue to comply with all conditions upon which the original license was issued; that no physical changes have been made to the licensed premises since the issuance of the original license, except those authorized by the State Liquor Authority; and represents that all statements made in the original application for this license and in any and all applications for renewal thereof are true and correct, except as modified in subsequent renewal applications or as otherwise reported to and acknowledged or approved by the Authority.

_____ (Print name of licensee(s))	_____ Date
_____ (Signature of licensee(s))	_____ (Home Address) (Home Telephone)

**THIS CERTIFICATION TO BE SIGNED AND DATED BY A CORPORATION OR A CLUB
 CORPORATE OFFICER OR CLUB ALCOHOLIC BEVERAGE CONTROL (ABC) OFFICER COMPLETE THIS SECTION**

MARION SCOTTO certifies that he is LLC MANAGER

(Print Name of Corporate Officer) (Print Title of Corporate Officer)

of the above named applicant corporation, that he knows the contents of the above application and the statements and answers therein, that the same are true of his own knowledge; that he has been authorized by order of the Board of Directors of said applicant corporation to make the statements and answers in this application in behalf of said applicant corporation with the same force and effect as if said corporation made such statements and answers itself; that it has complied and will continue to comply with all conditions upon which the original license was issued; that no physical changes have been made to the licensed premises since the issuance of the original license, except those authorized by the State Liquor Authority; and represents that all statements made in the original application for this license and in any and all applications for renewal thereof are true and correct, except as modified in subsequent renewal applications or as otherwise reported to and acknowledged or approved by the Authority.

_____ (Signature of authorized officer)	Date <u>OCTOBER 13, 2009</u> <u>350 EAST 72ND STREET</u> <u>NEW YORK, NEW YORK 10021</u> (212) 472-4466 (Home Address and Home Telephone)
--	--

STATE OF NEW YORK - LIQUOR AUTHORITY
(Renewal Application)

ADDRESS CHANGES OR CORRECTIONS: Note if physical address of premises was changed by Post Office, City, Town, Village, 911 Emergency Systems, or 911 address reassignment, please submit notice of authorization from appropriate agency.

Street address of premises to be licensed		Post office address of premises (if different)
City, town or village - Zip Code	Telephone Number	City, town or village - Zip Code (if different)
Landlord Name		Landlord Address

1a. If you answered yes to Question 1, on the reverse, complete the appropriate schedule "A" or "B".

Use this schedule "A" to set forth details of arrests, summonses and/or convictions which have occurred since the signing of the application for the currently held license and have not been reported to the Authority or having been reported have not been acknowledged by the Authority. Submit copy of Certificate of Disposition or Police Report.

Name of Defendant	Connection with Business (Licensee, employee, patron or other)	Crime or Offense	Date	Disposition in Each case (submit copy)

1b. **Use this schedule, "B" to set forth details of any outstanding loans and/or such "changes" (other than arrests, or address changes) which have not been reported to the Authority or having been reported, have not been acknowledged by the Authority. (See instruction forms. If more space is needed, attach rider).**

Nature of Change	Date	Details

**NOTICE TO MUNICIPALITY/COMMUNITY BOARD
(ON-PREMISES LICENSEES ONLY)**

On Premises Licensees are required by the Alcoholic Beverage Control Law, Section 64, Subdivision 2a, upon receipt of a renewal application for a license to sell alcoholic beverages at retail for consumption on the premises, to promptly notify, in writing, the clerk of the Village, Town or City wherein the premises are located, of your application to the State Liquor Authority not less than thirty days prior to the submission of your application to the Authority. In the City of New York, such notification is to be sent to the community board with jurisdiction over the area in which the premises is located. Notification pursuant to this Section is to be sent by certified mail, return receipt requested.

YOU MUST SUBMIT THE NOTICE PROVIDED WITH THIS RENEWAL PACKET TO THE COMMUNITY BOARD OR MUNICIPALITY AND SUBMIT SAME TO THIS OFFICE ALONG WITH THE ORIGINAL OR A COPY OF THE CERTIFIED MAIL CARD OR RECEIPT



EXCISE BOND UNDERWRITERS

15 MAIDEN LANE, SUITE 800 • NEW YORK, N.Y. 10038

BOND IN SUPPORT OF APPLICATION FOR LICENSE OR
PERMIT UNDER THE NEW YORK ALCOHOLIC
BEVERAGE CONTROL LAW

Bond Form L-9 Prescribed by
New York State Liquor Authority
November 1963

LIQUOR

** DUPLICATE ORIGINAL **

001--20

X-B12868--00

BOND EXPIRES IN

OCTOBER, 2011

BOND NUMBER

Penal Sum of Bond

1,000.00 Plus Costs

KNOW ALL MEN BY THESE PRESENTS, that we,

Name of Applicant

Address of Place of Business

STARJEM RESTAURANT INC.

34 EAST 52ND STREET
A/K/A 485 MADISON AVENUE
NEW YORK NY 10022

In the county of **NEW YORK** State of **NEW YORK** as Principal, and
having an office and usual place of business at

THE HANOVER INSURANCE COMPANY
330 SOUTH RANDOLPHVILLE ROAD
PISCATAWAY NJ 08854

a surety company approved by the Superintendent of Insurance of New York State as to solvency and responsibility and authorized to transact business in New York State, as Surety, are held and firmly bound unto the People of the State of New York in the penal sum set forth above and for the payment of any costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1,000.00) for the payment of which sum or sums, well and truly to be made, we, the said principal and surety, bind ourselves, successors, and assigns, respectively, jointly and severally, firmly by these presents.

WHEREAS, the above bounden principal is making application to the New York State Liquor Authority, for a license or permit under the Alcoholic Beverage Control Law and the said State Liquor Authority, by Part 81 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the Authority), having required the principal to file with it a bond to the People of the State of New York, as provided in said Law aforesaid.

NOW, THEREFORE, the conditions of this obligation are such that if the said license or permit applied for, which expires on the date designated in said license or permit, is granted to the said principal and the principal will not, during the license or permit period, suffer or permit any violation of the provisions of the Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or give cause as provided in the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the State Liquor Authority), for the cancellation, revocation or suspension of said license or permit or the issuance of an order of warning, and will pay all fines and penalties which shall accrue thereunder, together with all costs taxed or allowed in any action or proceeding brought or instituted for a violation of any of the provisions of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or for cause for the cancellation, revocation or suspension or issuance of an order of warning as provided in the Alcoholic Beverage Control Law or Rules of the Authority, or costs taxed or allowed in any review pursuant to Section 121 of the Alcoholic Beverage Control Law; then this obligation shall be void; otherwise to remain in full force and effect; subject, however, to the conditions stated on reverse side.

IN WITNESS WHEREOF the parties hereto have caused these presents to be signed and sealed this 9th day of OCTOBER,

2009

STARJEM RESTAURANT INC. L.S.
Principal

BY:

Mauro Scotta

THE HANOVER INSURANCE COMPANY

↑
APPLICANT MUST SIGN HERE

John L. Cornean
Attorney-in-fact

(OVER)

BOND IN SUPPORT OF APPLICATION FOR LICENSE OR PERMIT
UNDER THE NEW YORK ALCOHOLIC BEVERAGE CONTROL LAW

CONDITIONS

1. An action for the breach of any condition of this bond may be maintained without previous conviction or prosecution for the violation of any provision of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by the State Liquor Authority, or for cause as provided by the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the Authority).
2. The aggregate liability of the surety on account of any and all defaults hereunder shall in no event exceed the penal sum of this bond plus costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1000.00).
3. Upon the payment of any loss arising under this bond, the surety shall be subrogated to the rights and remedies of the obligee against the principal to recover from the principal any amount so paid.
4. Any action brought for the penal sum of this bond shall be commenced within twenty-four months after the expiration of the license or permit period aforementioned, or for costs within one year after final disposition of any action or proceeding. In the event of the institution of any action or proceeding to review the Authority's determination, the period of 24 months shall not commence until the final determination of the proceeding or litigation.
5. This bond shall be effective during the time the aforementioned license or permit shall be in effect and during any extension thereof.
6. A breach of any condition of this bond shall be deemed to have been established by the revocation, cancellation or suspension of the aforesaid license or permit or the issuance of an order of warning by the State Liquor Authority unless said revocation, cancellation, suspension or order of warning shall have been reversed or annulled by a Court of competent jurisdiction.
7. In any action or proceeding to recover on this bond, the principal and the company named herein as Surety waive any defense based upon any defect in the bond, including, but not limited to, an erroneous, improper or defective insertion or omission to insert or apparent alteration of the expiration year and/or amount of the penal sum of the bond and further waive any objection that the bond bears a printed, typewritten or facsimile signature. Any bond filed with the State Liquor Authority shall be admissible in evidence in any court on application of the State Liquor Authority or People of the State of New York without further proof of due execution thereof by or on behalf of the principal and surety and shall be conclusively presumed to have been duly executed by and on behalf of the principal and surety. Any bond filed with the State Liquor Authority and bearing the printed or facsimile name of the surety or the typewritten or facsimile signature of its representative shall be conclusively presumed to be the duly issued bond of the surety company and binding on it, its successors and assigns for the amount specified in Part 81 of Subtitle B of Title 9 of the Official Compilation of Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the State Liquor Authority).



STATE OF NEW YORK
EXECUTIVE DEPARTMENT
DIVISION OF ALCOHOLIC BEVERAGE CONTROL
STATE LIQUOR AUTHORITY

Standardized **RENEWAL APPLICATION NOTICE FORM** for Providing a
30-Day Advance Notice to a Local Municipality or Community Board
in connection with the submission to the State Liquor Authority of a
Renewal Application for an On-Premises Alcoholic Beverage License

1.	Date the Original copy of this Notice was Mailed to the Local Municipality or Community Board:		09	18	20	09			
THIS 30-DAY ADVANCE NOTICE IS BEING MAILED TO THE CLERK OF THE FOLLOWING LOCAL MUNICIPALITY OR COMMUNITY BOARD									
2.	Name of the Local Municipality or Community Board:		COMMUNITY BOARD NO. 5						
3.	Street Address of Local Municipality or Community Board:		450 SEVENTH AVENUE, SUITE 2109						
4.	City, Town, or Village:	NEW YORK	NY	Zip Code: 10123					
5.	Telephone Number of Clerk of Local Municipality or Community Board:		212	465	0907				
ATTORNEY FOR THE LICENSE HOLDER SUBMITTING THE RENEWAL APPLICATION:									
6.	Attorney's Full Name is:		ROBERT V. FERRARI						
7.	Attorney's Street Address:		630 THIRD AVENUE, 16 TH FLOOR						
8.	City, Town, or Village:	NEW YORK	NY	Zip Code: 10017					
9.	Business Telephone Number of Attorney:		212	972	7040				
CURRENT LICENSE HOLDER WHO/THAT WILL SUBMIT THE RENEWAL APPLICATION TO THE STATE LIQUOR AUTHORITY									
10.	Type(s) of Alcohol sold under the License ("X" one):		<input type="checkbox"/> Beer Only <input type="checkbox"/> Wine and Beer Only <input checked="" type="checkbox"/> Liquor, Wine, and Beer						
11.	Extent of Food Service: ("X" one)	<input checked="" type="checkbox"/> Restaurant (Sale of Food Primarily; Full Food Menu; Kitchen run by Chef) <input type="checkbox"/> Tavern-Restaurant (A mixed-use establishment that has both a sit-down dining area and a "stand-up" bar where patrons may receive direct deliveries of alcohol) <input type="checkbox"/> Tavern / Cocktail Lounge / Adult Venue / Bar (Alcohol sales primarily - meets legal minimum food availability requirements)							
12.	Type of Establishment:	<input type="checkbox"/> Hotel <input type="checkbox"/> Live Music <input type="checkbox"/> Disk Jockey <input type="checkbox"/> Juke Box <input type="checkbox"/> Patron Dancing (Small Scale) <input type="checkbox"/> Cabaret, Night Club, Discotheque, (Large Scale Dance Club) <input type="checkbox"/> Capacity for 600 or more patrons ("X" all that apply) <input type="checkbox"/> Club (e.g. Golf / Fraternal Org.) <input type="checkbox"/> Bed & Breakfast <input type="checkbox"/> Catering Facility <input type="checkbox"/> Stage Shows <input type="checkbox"/> Topless Entertainment <input type="checkbox"/> Other (Specify):							
13.	Licensed Outdoor Area:	<input checked="" type="checkbox"/> None <input type="checkbox"/> Rooftop <input type="checkbox"/> Patio or Deck <input type="checkbox"/> Freestanding Covered Structure <input type="checkbox"/> Garden / Grounds <input type="checkbox"/> Other (Specify):							
14.	Days and Hours of Operation (Complete all; circle AM or PM)	Monday 11:30 AM PM TO 11:00 AM PM	Tuesday 11:30 AM PM TO 11:00 AM PM	Wednesday 11:30 AM PM TO 11:00 AM PM	Thursday 11:30 AM PM TO 11:00 AM PM	Friday 11:30 AM PM TO 11:00 AM PM	Saturday 5:00 AM PM TO 11:00 AM PM	Sunday : AM PM TO : AM PM	
15.	Will the License Holder or a Manager be physically present within the establishment during All Hours of Operation? ("X" one):						<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
16.	License Serial Number:		1027039	17.	Expiration Date:		10	31	2009
18.	The License Holder's Full Name, as it appears on the Alcoholic Beverage License Certificate, is:		STARJEM RESTAURANT INC.						
19.	The Full Name of the Establishment (the Trade Name Under which the Licensed Establishment conducts business) is:		FRESCO BY SCOTTO						
20.	The Licensed Establishment is located within the building which has the following street address:		34 EAST 52 ND STREET A/K/A 485 MADISON AVENUE						
21.	City, Town, or Village:	NEW YORK	NY	Zip Code: 10022					
22.	The Licensed Establishment is located on the following floor(s) of the building at the above address:		BASEMENT, FIRST FLOOR AND MEZZANINE						
23.	Within the building at the above address, the Licensed Establishment is located within the room(s) numbered as follows:		N/A						
24.	Business Telephone Number of Current License Holder:		212	935	3434				
25.	Does the License Holder own the building in which the Licensed Establishment is located? ("X" one)		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		If "YES", SKIP items No. 26-29. Complete the 3 entries at Item No. 30. If "NO", ANSWER items No. 26-29, and complete the 3 entries at Item No. 30.				
OWNER OF THE BUILDING IN WHICH THE LICENSED ESTABLISHMENT IS LOCATED									
26.	Building Owner's Full Name is:		485 MADISON ASSOCIATES						
27.	Building Owner's Street Address:		110 EAST 59 TH STREET						
28.	City, Town, or Village:	NEW YORK	NY	Zip Code: 10022					
29.	Business Telephone Number of Building Owner:		212	421	1300				
30.	I hold the License or am a Principal of the Legal Entity that holds the License. Representations in this form are in conformity with representations made in submitted documents relied upon by the Authority when granting the existing license. I understand that representations made in this form will also be relied upon, and that false representations may result in revocation of the license. By my signature, I affirm - under Penalty of Perjury - that the representations made in this form are true.								
	Printed Name	Title	Signature						
	MARION SCOTTO	MEMBER	X Marion Scotto						



STATE OF NEW YORK

NOTICE OF APPEARANCE

Section 166 of the Executive Law requires a regulatory agency to maintain for public inspection, a record of who appears before it for a fee as a third party (i.e., an attorney, an agent, lobbyist*, or representative) on behalf of a person or organization subject to the regulatory jurisdiction of the agency. This usually occurs when the third party's client is involved in an enforcement, formal permit, or application matter. *This form is subject to all the rules and regulations of the Freedom of Information Law. Information that is confidential as a matter of law need not be furnished.*

Agency: New York State Liquor Authority Date: October 13, 2009

Division/Bureau: Licensing/Renewals

1. Name of individual appearing: Robert V. Ferrari

Address: 630 Third Avenue, 16th Floor, New York, New York 10017

Telephone: (212) 972-7040

2. Client represented: Starjem Restaurant Inc.

Address: 34 East 52nd street a/k/a 485 Madison Avenue, New York, New York 10022

Telephone: (212) 935-3434

3. Subject of appearance: ☒ Regulatory/Enforcement ☐ Lobbying

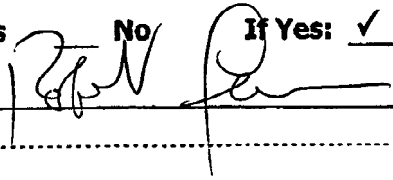
Filing application for renewal of license.

4. Acting in capacity of:

☒ Attorney ☐ Lobbyist

☐ Agent ☐ Other (describe) _____

5. Are you being compensated? ☒ Yes ☐ No If Yes: ☒ Fee ☐ Salary

6. Signature of individual appearing: 

7. Agency official (print name): _____

Signature: 

*A LOBBYIST is a person or organization, other than a New York State government employee acting in an official capacity, who appears for the purpose of influencing the adoption or rejection of proposed rules, regulations, rates or legislation, including the State budget. An "appearance" for lobbying purposes can be a personal visit, letter, telephone call, conversation at a meeting, or any other type of contact, but does not include "on the record" proceedings or hearings.

ROBERT V. FERRARI

ATTORNEY AT LAW

630 THIRD AVENUE, NEW YORK, N.Y. 10017

(212) 972-7040

TELECOPIER (212) 922-1939

E-MAIL: rvf@rvferrari.com

RICHARD H. BYRNES

September 18, 2009

Community Board No. 5
450 Seventh Avenue, Room 2109
New York, New York 10123

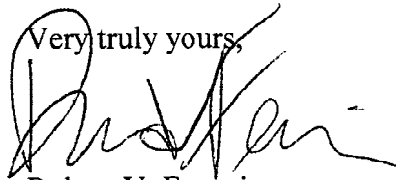
Re: Stargem LLC
34 East 52nd Street a/k/a 485 Madison Avenue
New York, New York 10022

Dear Sir/Madam,

Enclosed is Renewal Application Notice Form from the State Liquor Authority.

This is being sent pursuant to the Alcoholic Beverage Control Law.

Very truly yours,



Robert V. Ferrari

Enclosure

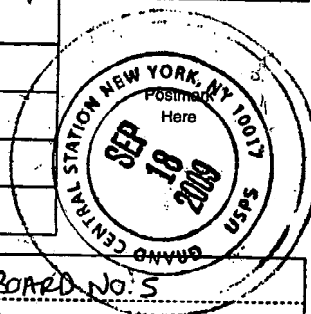
Via Certified Mail/
Return Receipt Requested

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$.44
Certified Fee	2.80
Return Receipt Fee (Endorsement Required)	2.30
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.54



Sent To
MANHATTAN COMMUNITY BOARD No. 5
Street, Apt. No.,
or PO Box No. **450 SEVENTH AVE, ROOM 2109**
City, State, ZIP+4[®]
NEW YORK, NEW YORK 10123

PS Form 3800, August 2006

See Reverse for Instructions

7009 0A20 0000 0244 3647

ON-PREMISES LIQUOR LICENSE
SERIAL #: 1027039
COUNTY: NEW YORK



EFFECTIVE DATE: 10/21/2009
EXPIRATION DATE: 10/31/2011
CERTIFICATE #: 803541

NEW YORK STATE LIQUOR AUTHORITY

THE LICENSEE DESIGNATED BELOW IS HEREBY GRANTED PERMISSION, UNDER THE ALCOHOLIC BEVERAGE CONTROL LAW TO TRAFFIC IN ALCOHOLIC BEVERAGE PURSUANT TO THE TYPE OF LICENSE INDICATED IN THE UPPER LEFT HAND CORNER OF THIS CERTIFICATE AND ACCORDING TO THE STATUTES AND REGULATIONS PERTAINING THERETO.

THIS LICENSE SHALL NOT BE TRANSFERABLE TO ANY OTHER PERSON OR TO ANY OTHER PREMISES OR TO ANY OTHER PART OF THE BUILDING CONTAINING SUCH LICENSED PREMISES: IT SHALL NOT BE DEEMED A PROPERTY OR VESTED RIGHT AND MAY BE REVOKED AT ANY TIME PURSUANT TO LAW

METHOD OF OPERATION

RESTAURANT SERVING BEER WINE AND LIQUOR

STARJEM RESTAURANT INC

34 E 52ND STREET
NEW YORK NY 10022

FILING FEE \$90.00
LICENSE FEE \$4,352.00

Dennis Rosen

Dennis Rosen
Chairman

BEFORE COMMENCING OR DOING ANY BUSINESS FOR THE TIME FOR WHICH THIS LICENSE HAS BEEN ISSUED, THE SAID LICENSE SHALL BE ENCLOSED IN A SUITABLE WOOD OR METAL FRAME, HAVING A CLEAR GLASS SPACE AND A SUBSTANTIAL WOOD OR METAL BACK SO THAT THE WHOLE OF SAID LICENSE MAY BE SEEN THEREIN, AND SHALL BE POSTED UP AND AT ALL TIMES DISPLAYED IN A CONSPICUOUS PLACE IN THE ROOM WHERE SUCH BUSINESS IS CARRIED ON, SO THAT ALL PERSONS VISITING SUCH PLACE MAY READILY SEE THE SAME.

SLA FORM 180-033 (11/99)

Certificate No. **G803541**

FOLD AND TEAR HERE

FOLD AND TEAR HERE

N. Y. S. DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

ALBANY, NY 12231-0001

FILING RECEIPT

=====

ENTITY NAME : STARJEM RESTAURANT CORP.

DOCUMENT TYPE : ASSUMED NAME CERTIFICATE

=====

FILER:

FILED: 09/26/2011

CASH#: 266796

FILM#: 20110926047

ROBERT V. FERRARI

630 THIRD AVENUE

16TH FL.

NEW YORK

NY

10017

PRINCIPAL LOCATION

34 EAST 52ND STREET

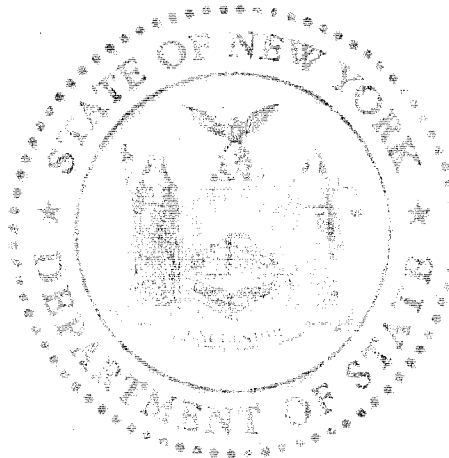
NEW YORK

NY 10022

COMMENT:

ASSUMED NAME

FRESCO BY SCOTTO



=====

SERVICE COMPANY : +++ NO SERVICE COMPANY +++

CODE:

BOX :

FEES 150.00

PAYMENTS: 150.00

FILING : 25.00

CASH :

COUNTY : 100.00

CHECK :

COPIES : .00

C CARD : 150.00

MISC : .00

REFUND :

WINDUP : 25.00



Section A

Serial Number of License To Be Changed: 1027039	County New York	Telephone # (212) 935-3434
Full Name Of Licensee As Listed On The License Certificate Starjem Restaurant Inc.	Trade Name (DBA) As Listed On The License Certificate None	
Street Address Of Licensed Premises 34 East 52nd Street a/k/a 485 Madison Avenue	Post Office Address, <i>if different than premises</i>	
City, Town or Village & Zip Code New York, New York 10022	City, Town or Village & Zip Code, <i>if different</i>	
Current FEIN#: 11-3139531		

Section B

Proposed License Name Change: Starjem Restaurant Corp.		Proposed Trade Name (DBA) Change: None
Address of Licensed Premises, <i>if different than above</i> :		Post Office of Premises, <i>if different than above</i> :
City, Town or Village, <i>if different than above</i> :	County, <i>if different</i> :	City, Town or Village, <i>if different</i> :
Proposed FEIN#: No change		

Section C

Change Requested: Check All That Apply

Fee Required

1. () The Post Office or Local Government is changing the Street name or numerical designation of the licensed premises	\$
2. (X) The correction of a typographical error in the original license.	0
3. () Amend corporate name of the licensed premises, no change in ownership or corporate entity.	0
4. () Change in principal name due to marriage or divorce	0
5. () Add/Change the Holding Corporation	0
6. () Change from a Sole Proprietorship to a Corporation/LLC	\$13
7. () Change from a Corporation/LLC to a Sole Proprietorship where the Sole Proprietor was the Sole Principal of the Corporation/LLC	\$13
8. () Death of Licensee (individual), Appointment of Executor or Administrator	In this section: -If your license is a Grocery/Drug Store the fee for Each box checked is: \$13
9. () Death of Licensee (partner), Appointment of Executor or Administrator	
10. () Receiver or Trustee	-For all other license types, the fee for Each box checked is: \$64
11. () Assignee for Benefit of Creditors	
12. () Guardian	
13. () Trustee in Bankruptcy	
14. () Dissolution of Partnership, with transfer to remaining partners	
15. () Addition of a Partner	

Total Fee Due: \$ 0.00

Section D

Identification of Individuals

Part 1. Identification of decedents, incompetents, partners and donors whose position or interest has *changed or ended* in connection with the changes requested in Section C.

Name	Current Title	Current Percentage of Interest	Current No. of Shares
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Part 2. List below the names of all entities, officers, directors, individual stockholders, individual partners, assignees, receivers, trustees, executors or guardians that are *new parties* in interest in the subject license.

Name	Proposed Title	Proposed Percentage of Interest	Proposed No. of Shares
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Part 3. Identification of owners and individuals *remaining* in interest in the subject license.

Name	Title	Percentage of Interest	No. of Shares
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

All parties listed in Part 2 above must complete a Personal Questionnaire as well as submit an original color photo, photo ID and Proof of Citizenship for themselves. Electronic fingerprinting of each new principal, after submission of application (fee of \$105 to be paid at L-1 Services) is also required.

Note: For any of the above, if financing is involved, please give details and supply copies of contracts, agreements, leases or any other legal document.

Section E

The licensee represents that there have been no changes other than those set forth herein, in any of the facts required to be set forth in the application for license, and agrees that any application filed by it or by any of its officers, directors or stockholders, for any license or permit under the Alcoholic Beverage Control Law, and the occupation record submitted herewith, shall be deemed and made a part hereof and considered by the Authority in acting upon this Application for Endorsement Certificate.

I/We, the Applicant(s) also certify that all papers filed in support of this application or any application filed under the Alcoholic Beverage Control Law by any person having an interest, direct or indirect, either in the business to be licensed or any license or permit shall be deemed a part hereof and considered by the State Liquor Authority in acting upon this application

I/We understand that the information I/we submit will be relied on by the State Liquor Authority in acting on this application. I/we understand that any false statements or misrepresentations shall constitute sufficient cause for the disapproval of the applications and/or revocation, cancellation or non-renewal of any license which is issued or affected as a result of such application

I/We verify that all of the above statements are true. If any of the above information changes prior to receipt of the license or approval of the endorsement, I/we will notify the Authority by registered or certified mail within 48 hours. If any changes occur after the issuance of the license or approval applied for, I/we understand that failure to give the required notice may constitute a violation of Section 110 of the Alcoholic Beverage Control Law and/or Rule 36 1(j) of the State Liquor Authority and will result in proceedings to revoke, cancel or suspend such license.

I/We, the Applicant(s) certify that there are no financial transactions involved concerning the license applied for EXCEPT as described herein

I/We, the Applicant(s) noted on this application certify that I/we know and attest to the validity of the contents of the above application and the statements contained therein.

Signature of Each Partner or General Partner, LLC Managing Member or a Corporate Officer currently licensed.

By Starjem Restaurant Corp. Date _____ Date _____
Marion Scotto Date 9/23/11 Date _____
Marion Scotto, President

Official Use Only:

Approved

Disapproved

by: _____ Date: _____

7

New York State Department of Taxation and Finance
Certificate of Authority

Identification number



(Use this number on all returns and correspondence)

**VALIDATED****11/18/2009**Dept of Tax
and Finance

STARJEM RESTAURANT CORP
FRESCO RESTAURANT
34 E 52ND ST
NEW YORK NY 10022-5914

is authorized to collect sales and use taxes under Articles 28 and 29 of the New York State Tax Law.

Nontransferable

This certificate must be prominently displayed at your place of business.
Fraudulent or other improper use of this certificate will cause it to be revoked.
The certificate may not be photocopied or reproduced.

1050111080098

10C3 - 3230835 P0000120-01

DTF 17-10-11-002

EXCISE BOND UNDERWRITERS

15 MAIDEN LANE, SUITE 800 • NEW YORK, N.Y. 10038

09/21/11
BOND IN SUPPORT OF APPLICATION FOR LICENSE OR
PERMIT UNDER THE NEW YORK ALCOHOLIC
BEVERAGE CONTROL LAW

LIQUOR

*** RIDER *** RIDER ***
*** EFFECTIVE 09/21/11 ***
BOND EXPIRES IN
*** CHANGE OF NAME-ADDRESS ***
OCTOBER, 2011

BOND NUMBER

001--20

Penal Sum of Bond

1,000.00

Plus Costs

KNOW ALL MEN BY THESE PRESENTS, that we,

Name of Applicant

Address of Place of Business

STARJEM RESTAURANT CORP.

34 EAST 52ND STREET
A/K/A 485 MADISON AVENUE
NEW YORK NY 10022

In the county of **NEW YORK**
having an office and usual place of business at

State of NEW YORK as Principal, and **THE HANOVER INSURANCE COMPANY**
330 SOUTH RANDOLPHVILLE ROAD
PISCATAWAY NJ 08854

a surety company approved by the Superintendent of Insurance of New York State as to solvency and responsibility and authorized to transact business in New York State, as Surety, are held and firmly bound unto the People of the State of New York in the penal sum set forth above and for the payment of any costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1,000.00) for the payment of which sum or sums, well and truly to be made, we, the said principal and surety, bind ourselves, successors, and assigns, respectively, jointly and severally, firmly by these presents.

WHEREAS, the above bounden principal is making application to the New York State Liquor Authority, for a license or permit under the Alcoholic Beverage Control Law and the said State Liquor Authority, by Part 81 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the Authority), having required the principal to file with it a bond to the People of the State of New York, as provided in said Law aforesaid.

NOW, THEREFORE, the conditions of this obligation are such that if the said license or permit applied for, which expires on the date designated in said license or permit, is granted to the said principal and the principal will not, during the license or permit period, suffer or permit any violation of the provisions of the Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or give cause as provided in the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the State Liquor Authority), for the cancellation, revocation or suspension of said license or permit or the issuance of an order of warning, and will pay all fines and penalties which shall accrue thereunder, together with all costs taxed or allowed in any action or proceeding brought or instituted for a violation of any of the provisions of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or for cause for the cancellation, revocation or suspension or issuance of an order of warning as provided in the Alcoholic Beverage Control Law or Rules of the Authority, or costs taxed or allowed in any review pursuant to Section 121 of the Alcoholic Beverage Control Law; then this obligation shall be void; otherwise to remain in full force and effect; subject, however, to the conditions stated on reverse side.

IN WITNESS WHEREOF the parties hereto have caused these presents to be signed and sealed this 23 day of SEPTEMBER

2011

STARJEM RESTAURANT CORP.
Principal (Applicant/Licensee)

L.S.

BY: Morgan Scott

THE HANOVER INSURANCE COMPANY

↑
APPLICANT MUST SIGN HERE

John L. Corneau
Attorney-in-fact

(OVER)

Bond Form L-9 Prescribed by the
New York State Liquor Authority
June 3, 1974

BOND IN SUPPORT OF APPLICATION FOR LICENSE OR PERMIT
UNDER THE NEW YORK ALCOHOLIC BEVERAGE CONTROL LAW
*** CHANGE OF NAME-ADDRESS ***
OCTOBER, 2011

00-00-184744

101--50

CONDITIONS

1. An action for the breach of any condition of this bond may be maintained without previous conviction or prosecution for the violation of any provision of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by the State Liquor Authority, or for cause as provided by the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the Authority).
2. The aggregate liability of the surety on account of any and all defaults hereunder shall in no event exceed the penal sum of this bond plus costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1000.00).
3. Upon the payment of any loss arising under this bond, the surety shall be subrogated to the rights and remedies of the obligee against the principal to recover from the principal any amount so paid.
4. Any action brought for the penal sum of this bond shall be commenced within twenty-four months after the expiration of the license or permit period aforementioned, or for costs within one year after final disposition of any action or proceeding. In the event of the institution of any action or proceeding to review the Authority's determination, the period of 24 months shall not commence until the final determination of the proceeding or litigation.
5. This bond shall be effective during the time the aforementioned license or permit shall be in effect and during any extension thereof.
6. A breach of any condition of this bond shall be deemed to have been established by the revocation, cancellation or suspension of the aforesaid license or permit or the issuance of an order of warning by the State Liquor Authority unless said revocation, cancellation, suspension or order of warning shall have been reversed or annulled by a Court of competent jurisdiction.
7. In any action or proceeding to recover on this bond, the principal and the company named herein as Surety waive any defense based upon any defect in the bond, including, but not limited to, an erroneous, improper or defective insertion or omission to insert or apparent alteration of the expiration year and/or amount of the penal sum of the bond and further waive any objection that the bond bears a printed, typewritten or facsimile signature. Any bond filed with the State Liquor Authority shall be admissible in evidence in any court on application of the State Liquor Authority or People of the State of New York without further proof of due execution thereof by or on behalf of the principal and surety and shall be conclusively presumed to have been duly executed by and on behalf of the principal and surety. Any bond filed with the State Liquor Authority and bearing the printed or facsimile name of the surety or the typewritten or facsimile signature of its representative shall be conclusively presumed to be the duly issued bond of the surety company and binding on it, its successors and assigns for the amount specified in Part 81 of Subtitle B of Title 9 of the Official Compilation of Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the State Liquor Authority).

THE HANOVER INSURANCE COMPANY

27

ROBERT V. FERRARI

ATTORNEY AT LAW

630 THIRD AVENUE, NEW YORK, N.Y. 10017

(212) 972-7040

TELECOPIER (212) 922-1939

E-MAIL: rvf@rvferrari.com

MICHAEL FERRARI

mf@rvferrari.com

September 27, 2011

BY HAND

New York State Liquor Authority

317 Lenox Avenue, 4th Floor

New York, New York 10027

Re: Starjem Restaurant Inc. (the "Licensee")

Serial No. - 1027039

License Expiration - 10/31/2011

Dear Sir/Madam:

Attached hereto is completed State Liquor Authority ("SLA") application for endorsement certificate regarding the above Licensee.

Upon examination of the Licensee's records, it came to my attention that the entity name "Starjem Restaurant Inc." is not the correct entity name, furthermore it is not a formed company. The original license application was filed by Licensee's prior attorney and contains a wholly incorrect entity name. The current license in effect will expire at the end of October which will necessitate the Licensee filing the renewal with the correct information which currently is not reflected on the SLA website. I understand that the renewal application examiners refer to the information contained on the website for the accuracy of information on the renewal forms. In an effort to correct the original error and avoid future issues with their renewal, I respectfully request that the attached endorsement application be filed as expeditiously as possible.

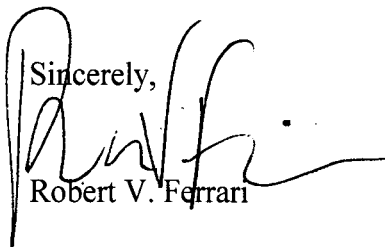
My client is struggling like so many other establishments during this difficult economic period and with the license expiration date rapidly approaching my client is concerned that it will be without its liquor license considering the timing of the filing of both applications. This would be a hardship that they cannot afford.

Please feel free to contact me with any questions regarding this application.

Thank you for your help in this matter.

Sincerely,

Robert V. Ferrari





OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

STATE OF NEW YORK
NOTICE OF APPEARANCE

Section 166 of the Executive Law requires a regulatory agency to maintain for public inspection, a record of who appears before it, for a fee as a third party (i.e., an attorney, an agent, lobbyist*, or representative) on behalf of a person or organization subject to the regulatory jurisdiction of the agency. This usually occurs when the third party's client is involved in an enforcement, formal permit, or application matter. *This form is subject to all the rules and regulations of the Freedom of Information Law. Information that is confidential as a matter of law need not be furnished.*

Agency: NY State Liquor Authority**Date:** September 27, 2011**Division/Bureau:** Licensing**1. Name of individual appearing:** Allison During (of Law Office of Robert V. Ferrari)**Address:** 630 Third Avenue, 16th Floor, New York, New York 10017**Telephone:** (212) 972-7040**2. Client represented:** Starjem Restaurant Inc.**Address:** 34 East 52nd Street aka 485 Madison Avenue, New York, New York 10022**Telephone:** (212) 935-3434**3. Subject of appearance:** ☒ **Regulatory/Enforcement** ☐ **Lobbying**

Filing application for Endorsement Certificate.

4. Acting in capacity of:☐ **Attorney** ☐ **Lobbyist** ☐ **Agent**
☒ **Other (describe)** Paralegal**5. Are you being compensated?** ☒ **Yes** ☐ **No**
If YES, Check FEE or SALARY ☐ **FEE** ☒ **SALARY****6. Signature of individual appearing:** **7. Agency official (print name):** _____**Signature:** _____

*A LOBBYIST is a person or organization, other than a New York State government employee acting in an official capacity, who appears for the purpose of influencing the adoption or rejection of proposed rules, regulations, rates, legislation, including the State budget or the specification or award of a State Procurement Contract. An "appearance" for lobbying purposes can be a personal visit, letter, telephone call, conversation at a meeting, or any other type of contact, but does not include "on the record" proceedings or hearings.

APPLICATION RECEIPT

SERIAL NUMBER: 1027039
10/13/2011 11:07 AM

STARJEM RESTAURANT INC
34 E 52ND STREET
NEW YORK, NY 10022

Thank you for submitting your application to the New York State Liquor Authority. We will be processing your application.

If you have any questions, please reference your application or any documents with the following seven digit serial number: 1027039

The following fees were received with your application:

Serial#	Description	Amount
1027039	ENDORSEMENT	0.00
Total		0.00

Sincerely yours,

Kerri J. O'Brien, Deputy Commissioner
licensinginfo@abc.state.ny.us

RECEIPT NUMBER: 971157369
ORI #: NY922217Z

If fingerprints are required, please wait 48 hours after your application receipt date before contacting L1-Identity Solutions to schedule your appointment. After the 48 hours, appointments must be scheduled within 2 weeks by going online to www.L1enrollment.com or by calling (877) 472-6915.

Fingerprint Request Forms are available on our website at: <http://www.abc.state.ny.us/forms-quick-find#retail>

If fingerprints are not taken within three (3) weeks from the date of this receipt, your application may be disapproved.

Fingerprints required for:

NOTE: If you are applying for an On Premises Liquor License or a Liquor Store License, you must visibly post notice of your intent to file an application on the front of your establishment. This notice can be found on our website at www.abc.state.ny.us/forms-quick-find#retail.

cc: ROBERT V. FERRARI, ESQ
630 3RD AVENUE, 16TH FLOOR
NEW YORK, NY 10017

STATE of NEW YORK LIQUOR AUTHORITY

Brand Label Registration Unit
84 Holland Avenue
Albany, New York 12208-3435

For Standard Brands
Use FORM 652

Application for Registration of
PRIVATE BRAND LABEL (liqu
(Sec. 107-a and Rule 50)

This application must be filed in DUPLICATE with the State Liquor Authority, Brand Label Registration Unit, at the above address by the brand owner. The application must be accompanied by (1) Photostat or duplicate copy of the Federal Certificate of Label Approval which must conform in all respects to the label submitted with this application and with the information set forth below, and (2) Certified check Bank Officers' check draft, or Money Order for the required fee \$250 - for each Brand Label, payable to the State Liquor Authority.

Name of retail licensee filing this application <i>Starjenn Restaurant Inc</i>		Post Office address <i>34 East 50th St. NYC 10022</i>
Licensee's Serial Number <i>403547</i>	Permanent License Number <i>1027039</i>	Telephone No. <i>(212) 935-3434</i>

The undersigned applicant hereby applies for approval of the registration of the Brand Label specified below:

Brand Name <i>1. Fresco by Scott</i>			Class (Whiskey, Gin, Rum, etc.) <i>Vodka</i>		Country of Origin <i>Holland</i>	
Type <i>Vodka</i>	Age	Proof <i>50</i>	If blended whiskey:	% Neutral Spirits	% Whiskey	
Name and address of New York State Wholesale Licensee from whom brand will be purchased <i>2. Puggans Distillers Product Corp / 360 Broadway Parkway West, New York, NY 10013</i>						
Is brand sold outside N.Y. State?			Yes or No <i>No</i>			
3.						

NOTE: ANY CHANGE IN THE LABEL OR IN ANY OF THE INFORMATION IN THIS APPLICATION MUST BE REPORTED TO THE STATE LIQUOR AUTHORITY WITHIN TEN DAYS AFTER SUCH CHANGE.

The Undersigned certifies that he is the retail licensee above named or that he is duly authorized by the licensee above named to execute this application for registration; that the retail licensee is the exclusive owner of the brand labels herein; that the brand is sold within the state exclusively by such retail licensee; that he knows the contents of the application and the statements contained therein, and the same are true of his own knowledge.

Dated *3/3/10*

[Signature]
(Full name of licensee)

UNIVERSAL NUMERIC CODE # "UNIMERC"
[] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] [] []

(Signature and title of licensee or authorized corporate officer)
ALL LABELS (FACE, BACK, NECK, ETC.) APPEARING ON CONTAINERS OF THE ABOVE BRAND MUST BE SECURELY AFFIXED TO THE REVERSE SIDE OF EACH COPY OF THIS APPLICATION

(For use of State Liquor Authority)

Received: *3/3/10 Withdrawn*
Per Neal
request

Checked by: _____
Deposit Record:

Class Code	Zone	County Class Serial No. (Licensee's Serial No.)	Deposit Date	Slip

Fee \$ _____ Audited by _____

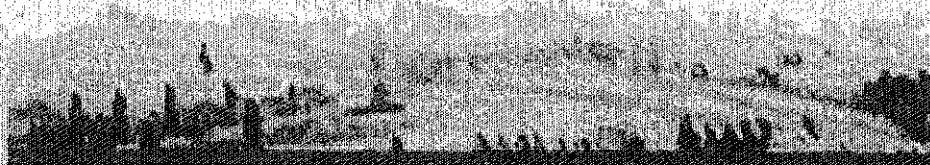
Registration No. _____

FRESCO

by Scotto

SUPER PREMIUM VODKA

Imported
Made in Holland
Five Times Distilled



IMPORTED

SMALL BATCH CUSTOM DISTILLED IN HOLLAND FROM THE PUREST GRAIN & WATER FOR AN EXCEPTIONAL SMOOTHNESS AND QUALITY. IMPORTED BY SOUTHERN WINE & SPIRITS OF AMERICA, INC., MIAMI, FL. DISTILLED FROM GRAIN and PRODUCT OF HOLLAND.

40% ALC./VOL. (80 PROOF) 1 LITRE

GOVERNMENT WARNING: (1) ACCORDING TO THE SURGEON GENERAL, WOMEN SHOULD NOT DRINK ALCOHOLIC BEVERAGES DURING PREGNANCY BECAUSE OF THE RISK OF BIRTH DEFECTS. (2) CONSUMPTION OF ALCOHOLIC BEVERAGES IMPAIRS YOUR ABILITY TO DRIVE A CAR OR OPERATE MACHINERY AND MAY CAUSE HEALTH PROBLEMS.

OMB No. 1513-0020 (01/31/2009)

FOR TTB USE ONLY

TTB ID

09135691000238

DEPARTMENT OF THE TREASURY
ALCOHOL AND TOBACCO TAX AND TRADE BUREAUAPPLICATION FOR AND
CERTIFICATION/EXEMPTION OF LABEL/BOTTLE
APPROVAL

(See Instructions and Paperwork Reduction Act Notice on Back)

1. REP. ID. NO. (If any)	CT	OR
	351	83

PART I - APPLICATION

2. PLANT
REGISTRY/BASIC
PERMIT/BREWER'S
NO. (Required)

FL1917

3. SOURCE OF
PRODUCT (Required)

Domestic

Imported

8. NAME AND ADDRESS OF APPLICANT AS SHOWN ON PLANT
REGISTRY, BASIC PERMIT OR BREWER'S NOTICE. INCLUDE APPROVED
DBA OR TRADENAME IF USED ON LABEL (Required)

SOUTHERN WINE & SPIRITS, SOUTH FLORIDA LICHOR DISTICBASTAL
SOUTHERN WINE & SPIRITS OF AMERICA, INC.
1600 NW 163RD ST
MIAMI FL 33169

4. SERIAL NUMBER
(Required)

0011PS

5. TYPE OF PRODUCT
(Required)

WINE

DISTILLED SPIRITS

MALT BEVERAGE

6. BRAND NAME (Required)

FRESCO

89. MAILING ADDRESS, IF DIFFERENT

7. FANCIFUL NAME (If any)

9. EMAIL ADDRESS

ROBERTMAN@REVLAW.COM

10. FORMULA/SOP NO.
(If any)

11. LAB. NO. & DATE/
PREIMPORT NO. &
DATE (If any)

B2007001B5001
03/15/2008

13. TYPE OF APPLICATION
(Check applicable box(es))

a. CERTIFICATE OF LABEL APPROVAL

b. CERTIFICATE OF EXEMPTION FROM LABEL
APPROVAL
(For sale in only 1 or 5 states
other than)

c. DISTINCTIVE LIQUOR BOTTLE APPROVAL
TOTAL BOTTLE CAPACITY & BOTTLE CLOSURE
(500 ml and over)

d. REEXAMINATION AFTER REJECTION
TTB ID NO.

12. NET CONTENTS
LITER

13. ALCOHOL
CONTENT

40

14. WINE
APPELLATION IF ON
LABEL

15. WINE VINTAGE DATE IF ON
LABEL

16. PHONE NUMBER
(202) 419-3733

17. FAX NUMBER
(202) 476-5189

19. SHOW ANY WORDING (a) APPEARING ON MATERIALS FIRMLY AFFIXED TO THE CONTAINER (e.g., caps, corks, etc.) OTHER THAN THE LABELS AFFIXED BELOW, OR (b) BLOWN, BRANDED OR EMBOSSED ON THE CONTAINER (e.g., net contents, etc.). THIS WORDING MUST BE NOTED HERE EVEN IF IT DUPLICATES PORTIONS OF THE LABELS AFFIXED BELOW. ALSO, PROVIDE TRANSLATIONS OF FOREIGN LANGUAGE TEXT APPEARING ON LABELS. BRAND NAME AND GRAPHICS MAY REPEAT ON CAP/CORK/SEAL/RIBBON.

PART II - APPLICANT'S CERTIFICATION

I, the undersigned, as owner, producer, importer, or other person appearing on this application, do hereby certify that the information provided is true and correct to the best of my knowledge and belief, and that the representations on the label attached to this form, including supplemental documents, truly and accurately represent the contents of the containers to which these labels will be applied. I also certify that I have read, understood and complied with the conditions and instructions which are attached to an original TTB F-5100-21, "Certification/Exemption of Label Notice Approval".

20. DATE OF
APPLICATION

12/01/2009

21. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT
(Application was e-filed)

22. PRINT NAME OF APPLICANT OR
AUTHORIZED AGENT

ROBERT LEHRMAN

12/23/09 7:16 PM

This certificate is issued subject to applicable laws, regulations and conditions as set forth in the instructions portion of this form.

23. DATE ISSUED 24. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU

12/09/2009

Kathy P. Harris

FOR TTB USE ONLY

QUALIFICATIONS

EXPIRATION DATE (if any)

STATUS

THE STATUS IS APPROVED

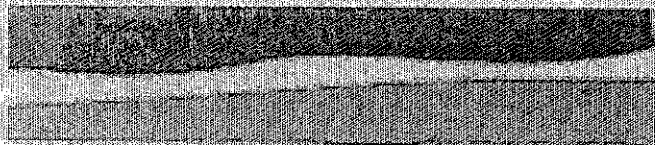
CLASS/TYPE DESCRIPTION

VODKA 80-90 PROOF FB

AFFIX COMPLETE SET OF LABELS BELOW

Image Type: Bottle (front)

Actual Dimensions: 3.8 inches W X 5.1 inches H

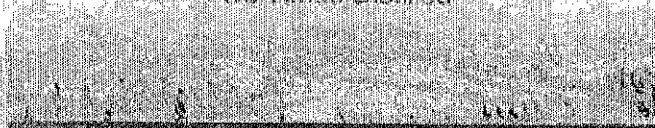


FRESCO

by Scotto

SUPER PREMIUM VODKA

Imported
Made in Holland
Five Times Distilled



IMPORTED

SMALL BATCH, CUSTOM DISTILLED IN HOLLAND FROM THE PUREST GRAIN & WATER FOR AN EXCEPTIONAL SMOOTHNESS AND QUALITY. IMPORTED BY SOUTHERN WINE & SPIRITS OF AMERICA, INC., MIAMI, FL. DISTILLED FROM GRAIN AND PRODUCTS HOLLAND.

40% ALC/VOL (80 PROOF) 1 LITRE

Image Type: Back

Actual Dimensions: 1.9 inches W X 3 inches H

PRIVATE STOCK

S P I R I T S
I N C O R P O R A T E D

3/5/2010

State of New York Liquor Authority
Brand label Registration Unit
84 holland Ave.
Albany N 12208-3435

Dear Wholesale Bureau

via Registered Mail

Attached Please find a re-submitted Private label registration application via registered mail as this application and \$250.00 fee was originally submitted on January 6th 2010 by certified mail and is still awaiting review. I have enclosed a notice of appearance, copy of our Federal COLA and two copies of our application. It is our understanding that a registered mail application is required due to your current work load and that if it is not approved with-in 30 days upon receipt it can be deemed approved. I know how busy your office is and I truly appreciate your help and attention to this application

Sincerely



Neal Frank
President



STATE OF NEW YORK

NOTICE OF APPEARANCE

Section 166 of the Executive Law requires a regulatory agency to maintain for public inspection, a record of who appears before it, for a fee as a third party (i.e., an attorney, an agent, lobbyist*, or representative) on behalf of a person or organization subject to the regulatory jurisdiction of the agency. This usually occurs when the third party's client is involved in an enforcement, formal permit, or application matter. *This form is subject to all the rules and regulations of the Freedom of Information Law. Information that is confidential as a matter of law need not be furnished.*

Agency: State Liquor Authority (Wholesale Area) Date: _____
Division/Bureau: ABC

1. Name of individual appearing: Neal Frank
Address: Private Stock Spirits
Telephone: 203-255-6100 x28

2. Client represented: Starjens Rest
Address: 34 East 52nd St NYC 10022
Telephone: 212-935-3434

3. Subject of appearance: Regulatory/Enforcement Lobbying
Application for Private Label Registration

4. Acting in capacity of:
Attorney Lobbyist
Agent ☒ Other (describe) Importer/Facilitator

5. Are you being compensated? Yes ☒ No If Yes: Fee Salary

6. Signature of individual appearing: [Signature]

7. Agency official (print name): _____

Signature: _____

*A LOBBYIST is a person or organization, other than a New York State government employee acting in an official capacity, who appears for the purpose of influencing the adoption or rejection of proposed rules, regulations, rates, legislation, including the State budget or the specification or award of a State Procurement Contract. An "appearance" for lobbying purposes can be a personal visit, letter, telephone call, conversation at a meeting, or any other type of contact, but does not include "on the record" proceedings or hearings.

Asprion, Nancy (ABC)

From: Benedetto, Robert (ABC)
Sent: Thursday, March 18, 2010 10:14 AM
To: Asprion, Nancy (ABC)
Subject: RE: Hardship letter for Starjem Restaurant Inc application

Nancy,

I approve the request.

Robert Benedetto
Director of Wholesale
New York State Liquor Authority
Alfred E. Smith Office Bldg
80 So. Swan St. Suite 900
Albany, New York 12210-8002
Telephone: (518) 474-6820
Fax: (518) 402-4143
rbenedetto@abc.state.ny.us

From: Asprion, Nancy (ABC)
Sent: Thursday, March 18, 2010 8:39 AM
To: Benedetto, Robert (ABC)
Subject: FW: Hardship letter for Starjem Restaurant Inc application

Bob,

For your consideration.

Nancy Asprion
Principal Clerk
Wholesale Unit
New York State Executive Department
Division of Alcoholic Beverage Control
80 S. Swan Street, Suite 900
Albany, NY 12210-8002
Phone: 518-474-6820
Email: Nasprion@abc.state.ny.us

From: neal [mailto:]
Sent: Wednesday, March 17, 2010 1:55 PM
To: Asprion, Nancy (ABC)
Subject: Hardship letter for Starjem Restaurant Inc application

Hi Nancy- I hope all is well. We sent via registered mail dated 3/5/10 the re-submitted brand label registration for the applicant above under the brand name Fresco by Scotto. This private label brand wants to cancel his order if not available to him by April 1st. They are heading into the slow summer months and notified me they will not accept the product after that day. We have made a sizable investment in this brands development and

will lose several thousand dollars. If you can share with the director and advise on the status of our application I would be most grateful. Regards Neal

Neal Frank

President

Private Stock Spirits

1720 Post Road -Ste 131

Westport CT 06880

C

O-

F-

Asprion, Nancy (ABC)

From: neal [REDACTED]
Sent: Monday, March 22, 2010 5:38 PM
To: abc sm wholesale
Subject: RE: Hardship letter for Starjem Restaurant inc application

Nancy- It was nice speaking with you today. Thanks for all your help. This customer wants to cancel if I do not give him his product by 4/1/10 which I do not think we can do, so at this time I will withdraw his application. Thanks again for all your help. My very Best Neal

Neal Frank
President
Private Stock Spirits
1720 Post Road -Ste 131
Westport CT 06880

C- [REDACTED]
O- [REDACTED]
F- [REDACTED]

From: Asprion, Nancy (ABC) [mailto:NASprion@abc.state.ny.us] **On Behalf Of** abc.sm.wholesale
Sent: Thursday, March 18, 2010 2:36 PM
To: Neal Frank
Subject: FW: Hardship letter for Starjem Restaurant inc application

Hello Neal,

The request to expedite the Fresco By Scotto application has be reviewed and authorized.

During review of the application, it was found that the label is missing the statement that indicates this product is made exclusively for Starjem Restaurant. The application cannot be approved until we have a corrected label.

Please let me know how long it will take for our office to receive the corrected label so we can take appropriate action.
Thank you.

Nancy

Nancy Asprion
Principal Clerk
Wholesale Unit
New York State Executive Department
Division of Alcoholic Beverage Control
30 S. Swan Street, Suite 900
Albany, NY 12210-8002
Phone: 518-474-6820
Email: NASprion@abc.state.ny.us

From: neal [REDACTED]
Sent: Wednesday, March 17, 2010 1:55 PM

To: Asprion, Nancy (ABC)

Subject: Hardship letter for Starjem Restaurant inc application

Hi Nancy- I hope all is well. We sent via registered mail dated 3/5/10 the re-submitted brand label registration for the applicant above under the brand name Fresco by Scotto. This private label brand wants to cancel his order if not available to him by April 1st. They are heading into the slow summer months and notified me they will not accept the product after that day. We have made a sizable investment in this brands development and will lose several thousand dollars. If you can share with the director and advise on the status of our application I would be most grateful. Regards Neal

Neal Frank

President

Private Stock Spirits

1720 Post Road -Ste 131

Westport CT 06880

C -

O -

F -



Click to Logon

CONTENTS

40 Canal Street, New York, NY 10012
 Tel: (212) 754-2700 Fax: (212) 754-1361

Fresco by Scott's® Modern Tuscan Cuisine Now Available from Schwan's Home Service. [click here to Order Now!](#)



FRESCO
by Scans

3/22/00. Per the above note to identify pictures
submitted for Sturgeon Report and since in 2000
identify Sturgeon as *Acipenser* *baileyi*. Update
the report to SEA to add 2000, add wording to
add *Sturgeon* *baileyi* to the survey for 2000.

[illegible]

STATE of NEW YORK LIQUOR AUTHORITY

Brand Label Registration Unit

84 Holland Avenue

Albany, New York 12208-3435

For Standard Brands
Use FORM 652Application for Registration of
PRIVATE BRAND LABEL (liquor)
(Sec. 107-a and Rule 50)

This application must be filed in DUPLICATE with the State Liquor Authority, Brand Label Registration Unit, at the above address by the brand owner. The application must be accompanied by (1) Photostat or duplicate copy of the Federal Certificate of Label Approval which must conform in all respects to the label submitted with this application and with the information set forth below, and (2) Certified check Bank Officers' check, draft, or Money Order for the required fee \$250. - for each Brand Label, payable to the State Liquor Authority.

Name of retail licensee filing this application

Post Office address

Starjorn Restaurant, Inc. 34 East 52nd Street NYC 10022

Licensee's Serial Number

Permanent License Number

Telephone No.

803541

(212) 935-3434

The undersigned applicant hereby applies for approval of the registration of the Brand Label specified below:

Brand Name

Class (Whiskey, Gin, Rum, etc.)

Country of Origin

Fresco by Scott

Vodka

Holland

Type

Age

Proof

If blended whiskey:

% Neutral Spirits

% Whiskey

Vodka

N/A

60

Name and address of New York State Wholesale Licensee from whom brand will be purchased

560 Brady Parkway West
Blauvelt, N.Y. 10913

Is brand sold outside N.Y. State?

(If yes - explain in rider)

Yes or No

NOTE: ANY CHANGE IN THE LABEL OR IN ANY OF THE INFORMATION IN THIS APPLICATION MUST BE REPORTED TO THE STATE LIQUOR AUTHORITY WITHIN TEN DAYS AFTER SUCH CHANGE.

The undersigned certifies that he is the retail licensee above named or that he is duly authorized by the licensee above named to execute this application for registration; that the retail licensee is the exclusive owner of the brand labels herein; that the brand is sold within the state exclusively by such retail licensee; and he knows the contents of the application and the statements contained therein, and the same are true of his own knowledge.

Dated

1/6/2010

Neal Frank

(Full name of licensee)

UNIVERSAL NUMERIC CODE # "UNIMERC"

[] []

(Signature and title of licensee or authorized corporate officer)

ALL LABELS (FACE, BACK, NECK, ETC.) APPEARING ON CONTAINERS OF THE ABOVE BRAND MUST BE SECURELY AFFIXED TO THE REVERSE SIDE OF EACH COPY OF THIS APPLICATION

(For use of State Liquor Authority)

Received:

3/17/10

Checked by:

Deposit Record:

Class Code	Zone	County	Class	Serial No. (Licensee's Serial No.)	Deposit Date	Exp. No.

Fee \$

Audited by

Registration No.

ORM 653 (09-93) Private Brand - Liquor

ACTION: Approved
Disapproved

000275



FRESCO

by Scotto

SUPER PREMIUM VODKA

Imported
Made in Holland
Five Times Distilled



IMPORTED

SMALL BATCH CUSTOM DISTILLED IN HOLLAND FROM THE FINEST
GRAIN & WATER FOR AN EXCEPTIONAL SMOOTHNESS AND QUALITY IM-
PORTED BY SOUTHERN WINE & SPIRITS OF AMERICA, LLC - MIAMI, FL
DISTILLED FROM GRAIN - 100% PRODUCT OF HOLLAND

40% ALC./VOL. (80 PROOF) 1 LITRE

OMB No. 1513-0020 (04/31/2009)

FOR TTB USE ONLY

TTB ID

0935001000330

DEPARTMENT OF THE TREASURY
ALCOHOL AND TOBACCO TAX AND TRADE BUREAU
**APPLICATION FOR AND
CERTIFICATION/EXEMPTION OF LABEL/BOTTLE
APPROVAL**

(See Instructions and Paperwork Reduction Act Notice on Back)

1. REP. ID. NO. (If any) CT OR
35 83

PART I - APPLICATION

2. PLANT
REGISTRY/BASIC
PERMIT/BREWER'S
NO. (Required)

FLESCIT

3. SOURCE OF
PRODUCT (Required)

Domestic

Imported

3. NAME AND ADDRESS OF APPLICANT AS SHOWN ON PLANT
REGISTRY, BASIC PERMIT OR BREWER'S NOTICE. INCLUDE APPROVED
DBA OR TRADENAME IF USED ON LABEL (Required)

SOUTHERN WINE & SPIRITS, SOUTH FLORIDA LIQUOR DISTCOASTAL,
SOUTHERN WINE & SPIRITS OF AMERICA, INC.
18003 WY 183RD ST

4. SERIAL NUMBER
(Required)

001RS

5. TYPE OF PRODUCT
(Required)

WINE

DISTILLED SPIRITS

MALT BEVERAGE

MIAMI FL 33169

6. BRAND NAME (Required)

FLESCIT

7a. MAILING ADDRESS, IF DIFFERENT

7. FANCIFUL NAME (If any)

8. EMAIL ADDRESS

ROBERTMAN@REVELAW.COM

10. FORMULA/SCP NO.
(If any)

11. LAB. NO. & DATE /
PREIMPORT NO. &
DATE (If any)

B2007/00165001-
03/19/2008

12. TYPE OF APPLICATION
(Check applicable box(es))

a. CERTIFICATE OF LABEL APPROVAL

12. NET CONTENTS

1 LITER

13. ALCOHOL
CONTENT

40

14. WINE
APPELLATION IF ON
LABEL

b. CERTIFICATE OF EXEMPTION FROM LABEL
APPROVAL
(See also 15. 9999 (If 9999, include
information.)

15. WINE VINTAGE DATE IF ON
LABEL

16. PHONE NUMBER
(202) 443-3735

17. FAX NUMBER
(202) 476-6180

c. DISTINCTIVE BOTTLE/BOTTLE APPROVAL
TOTAL BOTTLE CAPACITY BEING PRODUCED
(If in thousands)

d. RESUBMISSION AFTER REJECTION
TTB ID NO.

TO SHOW ANY WORDING (a) APPEARING ON MATERIALS AFFIXED TO THE CONTAINER (e.g., cork, cap, scale, label, etc.)
OTHER THAN THE LABELS AFFIXED BELOW, OR (b) BLOWN, BRANDED OR EMBOSSED ON THE CONTAINER (e.g., bottle contents
etc.) THIS WORDING MUST BE NOTED HERE EVEN IF IT DUPLICATES PORTIONS OF THE LABELS AFFIXED BELOW. ALSO
PROVIDE TRANSLATIONS OF FOREIGN LANGUAGE TEXT APPEARING ON LABELS.
BRAND NAME AND GRAPHICS MAY REPEAT ON CAP/CORK/SEAL/NECK

PART II - APPLICANT'S CERTIFICATION

I, under the penalties of perjury, declare that all statements appearing on this application are true and correct to the best of my knowledge
and belief, and that the representations on the labels attached to this form, including supplemental documents, truly and correctly represent
the content of the containers to which these labels will be applied. I also certify that I have read, understood and complied with the
conditions and instructions which are attached to the original TTB F-510C-11, Certificate/Exemption of Label/Bottle Approval.

20. DATE OF
APPLICATION

12/21/2009

21. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT
(If Application was e-filed)

PART III - TTB CERTIFICATE

22. PRINT NAME OF APPLICANT OR
AUTHORIZED AGENT

ROBERT LEHMAN

12/23/09 3:15 PM

This certificate is issued subject to applicable laws, regulations and conditions as set forth in the instructions portion of this form.

23. DATE ISSUED 24. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU

12/27/2009

Larry Pacheco

FOR TTB USE ONLY

QUALIFICATIONS

EXPIRATION DATE (if any)

STATUS

THE STATUS IS APPROVED

CLASS/TYPE DESCRIPTION

VODKA 80-90 PROOF

ATTACH COMPLETE SET OF LABELS BELOW

Image Type: Brand Name

Actual Dimensions: 2.8 inches W X 5.1 inches H



FRESCO

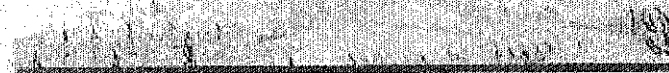
by Scotto

SUPER PREMIUM VODKA

Imported

Made in Holland

Five Times Distilled



IMPORTED

SMALL BATCH CUSTOM DISTILLED IN HOLLAND FROM THE FINEST
LAWN & WATER FOR AN EXCEPTIONAL SMOOTHNESS AND QUALITY. IM-
PORTED BY SOUTHERN VINE & SPIRITS OF AMERICA, LLC, BEAUNE, CA.
DISTILLED FROM GRAIN. NOT A PRODUCT OF HOLLAND.

40% ALC/VOL (80 PROOF) 1 LITRE

Image Type: Back

Actual Dimensions: 2.8 inches W X 5.1 inches H

Additional Label
Submission

FRESCO

by Scotto

SUPER PREMIUM VODKA

Imported
Made in Holland
Five Times Distilled



IMPORTED

SMALL BATCH CUSTOM DISTILLED IN HOLLAND FROM THE PUREST GRAIN & WATER FOR AN EXCEPTIONAL SMOOTHNESS AND QUALITY. IMPORTED BY SOUTHERN WINE & SPIRITS OF AMERICA, INC. MIAMI, FL. DISTILLED FROM GRAIN and PRODUCT OF HOLLAND.

40% ALC./VOL. (80 PROOF) 1 LITRE

GOVERNMENT WARNING: (1) ACCORDING TO THE SURGEON GENERAL, WOMEN SHOULD NOT DRINK ALCOHOLIC BEVERAGES DURING PREGNANCY BECAUSE OF THE RISK OF BIRTH DEFECTS. (2) CONSUMPTION OF ALCOHOLIC BEVERAGES IMPAIRS YOUR ABILITY TO DRIVE A CAR OR OPERATE MACHINERY AND MAY CAUSE HEALTH PROBLEMS.

Asprion, Nancy (ABC)

From: Neal Frank [REDACTED]
Sent: Friday, January 22, 2010 10:18 AM
To: Asprion, Nancy (ABC)
Subject: private label application Fresco Vodka

Hi Nancy- thanks again for your time and help. As we discussed, please find below a copy of the label and government warning that will be on the brand under the registered brand name: Fresco By Scotto, for the retail licensee Starjem restaurant Inc., Please include with our application. Thanks again for your assistance. Neal

Neal Frank
President
Private Stock Spirits
1720 Post Road -Ste 131
Westport CT 06880

c
o
f

Asprion, Nancy (ABC)

From: neal [REDACTED]
Sent: Wednesday, March 17, 2010 12:09 PM
To: Asprion, Nancy (ABC)
Subject: RE: Starjem Private label Registration

We resubmitted this registration by registered mail. Thanks Neal

Neal Frank
President
Private Stock Spirits
1720 Post Road -Ste 131
Westport CT 06880

c [REDACTED]
o [REDACTED]
f [REDACTED]

From: Asprion, Nancy (ABC) [mailto:NASprion@abc.state.ny.us]
Sent: Tuesday, March 16, 2010 10:59 AM
To: neal
Subject: RE: Starjem Private label Registration

Hi Neal,

Sorry to be so long in getting back to you. Some events beyond our control have caused delays in our daily routines.

I'm sorry to hear about the loss of your computer files. Any request for copies of documents from our "files" must go through our Freedom of Information Office. You can contact them at FOIL@abc.state.ny.us or 518-408-2508.

Nancy

From: neal [mailto:[REDACTED]]
Sent: Wednesday, February 24, 2010 11:55 AM
To: Asprion, Nancy (ABC)
Subject: Starjem Private label Registration

Hi Nancy-We had a computer crash that contained scanned copies of our label registrations. We are asking various state liquor authorities if they can fax a copy of our pending applications to the fax below. I would be very grateful if you could send me a fax of our application received on Jan 15th for the brand name Fresco by Scotto. Retail Licensee Starjem. This file has just a brand registration form and a notice of appearance. Thanks so very much. My best Neal

Neal Frank
President

Private Stock Spirits

1720 Post Road -Ste 131

Westport CT 06880

C

O-

F-

RENEWAL ADVISORY**557425****Serial #: 1027039****Key: 111NEWOP0006650252****License fee: 4,352.00****Filing fee: 90.00****Total fee due: 4,442.00****New effective date: 11/01/2011****New expiration date: 10/31/2013****Premises Address:****STARJEM RESTAURANT INC****34 E 52ND STREET AKA 485 MADISON AVENUE
NEW YORK, NY 10022****RECEIVED OCT 11 2011**

*This letter is to notify you that your current license is due to expire on 10/31/2011.
The renewal procedures have changed so please review all forms / instructions carefully.*

THIS IS THE ONLY NOTIFICATION YOU WILL RECEIVE.

*The renewal application form can be found on the Authority's website at
www.abc.state.ny.us/renewals*

**You must complete the renewal application and return it with this renewal advisory to the
address below:**

**M&T Bank Lockbox
New York State Liquor Authority
PO Box 8000-Dept 930
Buffalo, New York 14267**

**You must include this renewal advisory, the completed renewal application, appropriate fee and
all other required documents.**

**The required Community Board / Municipality notice form for on-premises licensees is also
available on our website. You must notify the Community Board / Municipality at least 30 days
prior to sending the renewal forms to the Authority.**

**NOTE: Renewal applications must be mailed to the address shown above. Applications sent to any
other address will be returned and will delay the processing of your renewal.**



RETAIL-RENEWAL

Please complete all of the fields provided in the form. If the Trade Name has changed since the last renewal filing you must also include a filing receipt or a certificate of assumed name with the renewal application. Other changes noted on the renewal application do not constitute proper notification to the Authority, nor does the approval of the renewal application constitute approval of any changes listed in the renewal, other than the Trade Name change.

1. Licensed Premises Information

Is your licensed premises closed? ☐ YES ☒ NO

If yes, is your license in safekeeping with the New York State Liquor Authority? ☐ YES ☐ NO

Licensed Premises Name: License Serial #:
 Trade Name (if applicable): Effective Date:
 Federal Employer Identification Number: Expiration Date:

If you hold an on-premises license, please select the method of operation from the following list:

- ☐ Bar/Tavern ☐ Cabaret ☐ Cafe ☐ Catering Establishment
☐ Club (i.e., Fraternal Org) ☐ Hotel ☐ Night Club ☐ Pizzeria ☒ Restaurant

Please list any condition(s) or stipulation(s) associated with your current license that were agreed to with the local Municipality/ Community Board or placed on your license by the Authority. Attach additional sheets if necessary.

None

Address of the Licensed Premises**ALL SECTIONS MUST BE COMPLETED IN ORDER TO APPROVE YOUR RENEWAL**

If your address has been changed as a result of a 911 change, please provide proof of the change such as notification of the 911 address change from the local Municipality/Community Board or notification from the Post Office.

Licensed Premises Address:
 City: State: Zip Code:
 County: Email Address:
 Premises Telephone # (include area code): Contact Phone # (include area code):

Mailing Address (if different than premises address)

Mailing Address:
 City: State: Zip Code:

Landlord/Building Owner Name and Address - also required if building is owned by the licensee

Landlord Name:
 Address:
 City: State: Zip Code:

RETAIL-RENEWAL**2. Arrest/Conviction Information**

Has the applicant or (if partnership) any of the partners, or (if a corporation) any of the officers, directors, stockholders, or any agent or employee of the applicant, been **ARRESTED** and/or **CONVICTED** during this renewal period (including pleas of guilty or suspended sentences) of any felony or of any other crime or offense of any kind except minor traffic violations? ☐ YES ☒ NO ☐ Previously Reported

If YES, complete the chart below and where applicable, submit a Police Report, Certificate of Disposition, Certificate of Conviction or a Certificate of Relief from Disabilities from the Court Clerk for each case. If necessary, attach additional sheets.

Name of the Defendant	Connection with Licensed Premise (licensee, officer, employee)	Date of Offense	Nature of the arrest and/or conviction	Disposition

3. Applicant Information and Certification

The signature below certifies that I know the contents of this application and the statements contained therein; that the same are true of my own knowledge; and that I am authorized to execute this application and sign this certification. I further certify that I have read the terms and conditions included with this application for the renewal and agree to comply with the conditions.

A. Sole Proprietor (This section must be completed, signed and dated by the sole proprietor.)

Print Name:	<input type="text"/>	Date of Birth:	<input type="text"/>	Social Security #:	<input type="text"/>
Residence street address:	<input type="text"/>				
City:	<input type="text"/>	State:	<input type="text"/>	Zip Code:	<input type="text"/>
Telephone # (include area code):	<input type="text"/>	Cell Phone # (include area code):	<input type="text"/>		
Signature _____		Title _____		Date _____	

B. Partnership (This section must be completed, signed and dated by each partner.)

Print Name:	<input type="text"/>	Date of Birth:	<input type="text"/>	Social Security #:	<input type="text"/>
Residence street address:	<input type="text"/>				
City:	<input type="text"/>	State:	<input type="text"/>	Zip Code:	<input type="text"/>
Telephone # (include area code):	<input type="text"/>	Cell Phone # (include area code):	<input type="text"/>		
Partner Signature _____		Title _____		Date _____	

RETAIL-RENEWAL**B. Partnership (Continued -attach additional sheets if necessary)**

Print Name:	<input type="text"/>	Date of Birth:	<input type="text"/>	Social Security #:	<input type="text"/>
Residence street address:	<input type="text"/>				
City:	<input type="text"/>	State:	<input type="text"/>	Zip Code:	<input type="text"/>
Telephone # (include area code):	<input type="text"/>	Cell Phone # (include area code):	<input type="text"/>		
Partner Signature	Title		Date		

C. Corporation, LLC or LLP (This section must be completed, signed and dated by an authorized officer. This principal should be the primary point of contact.)

Print Name:	Marion Scotto	Date of Birth:	<input type="text"/>	Social Security #	<input type="text"/>
Residence street address:	<input type="text"/>				
City:	<input type="text"/>	State:	<input type="text"/>	Zip Code:	<input type="text"/>
Title:	President				
Telephone # (include area code):	<input type="text"/>	Cell Phone # (include area code):	<input type="text"/>		
Authorized Signature	Title		Date		

Marion Scotto *Pres.* *10/4/2011*

All remaining Principals on the license must be listed below.

(Attach additional sheets as needed to include all principals)

Print Name:	Anthony M. Scotto, Jr.	Date of Birth:	<input type="text"/>	Social Security #	<input type="text"/>
Residence street address:	<input type="text"/>				
City:	<input type="text"/>	State:	<input type="text"/>	Zip Code:	<input type="text"/>
Title:	Secretary				
Telephone # (include area code):	<input type="text"/>	Cell Phone # (include area code):	<input type="text"/>		

Print Name:	Elaina Scotto	Date of Birth:	<input type="text"/>	Social Security #	<input type="text"/>
Residence street address:	<input type="text"/>				
City:	<input type="text"/>	State:	<input type="text"/>	Zip Code:	<input type="text"/>
Title:	Vice President				
Telephone # (include area code):	<input type="text"/>	Cell Phone # (include area code):	<input type="text"/>		

RETAIL-RENEWAL**List of other principals continued (Attach additional pages as needed to include all principals)**

Print Name:	Rosanna Scotto	Date of Birth:		Social Security #:	
Residence street address:					
City:		State:		Zip Code:	
Title:	Stockholder				
Telephone # (include area code):		Cell Phone # (include area code):			

Print Name:		Date of Birth:		Social Security #:	
Residence street address:					
City:		State:		Zip Code:	
Title:					
Telephone # (include area code):		Cell Phone # (include area code):			

D. Club (This section must be completed, signed and dated by the Club Alcoholic Beverage Control (ABC) Officer who has been approved by the State Liquor Authority.)

Print Name:		Date of Birth:		Social Security #:	
Residence street address:					
City:		State:		Zip Code:	
Title:					
Telephone # (include area code):		Cell Phone # (include area code):			

Authorized Signature	Title	Date
----------------------	-------	------

NEW YORK STATE LIQUOR AUTHORITY ALCOHOLIC BEVERAGE CONTROL

RENEWAL APPLICATION / INSTRUCTION FORM

The Renewal Advisory previously mailed to you must be submitted with this Renewal Application

PLEASE ALLOW TEN(10) BUSINESS DAYS FOR PROCESSING. BE ADVISED THAT ANY DEFICIENCY IN THE APPLICATION OR FAILURE TO PROVIDE ALL SUPPORTING DOCUMENTATION WILL DELAY THE PROCESSING OF YOUR RENEWAL OR MAY LEAD TO THE DISAPPROVAL OF YOUR RENEWAL.

This application must be accompanied by the appropriate fee in check or money order ONLY, made payable to the New York State Liquor Authority. Cash will NOT be accepted.

Documents to include with your renewal application:

1. Completed Renewal Application form and Renewal Advisory;
2. Personal, business, bank check or money order in the total amount due as listed on the invitation to renew. Write your license serial number on the check. Submit a check or money order with the Renewal Application. Make check or money order payable to New York State Liquor Authority.
3. Original surety bond in the appropriate amount; **SIGNED BY THE LICENSEE**; and with the expiration of the bond being the same as the license expiration date on the Renewal Advisory previously mailed to you. ***The bond must have the premises name and address typed exactly as it appears on your license certificate;***
4. Renewal Application Notice Form as required by Section 109 Subdivision 2 of the ABC Law;
 - 4a. Proof of 30-day notice to the local Municipality/Community Board which consists of:
 - a. A copy of the certified mail receipt or a copy of the certified mail card - return receipt requested; or
 - b. A copy of the delivery receipt from a commercially recognized delivery service; or
 - c. A copy of the renewal application notice form date-stamped by the local Municipality/Community Board.
5. Notice of appearance if an attorney or representative assisted in completing this renewal application.

If there have been any changes to the principals of the license, any physical changes to the establishment or changes to the approved method of operation you must file the appropriate change application that can be found on our website at: www.abc.state.ny.us. You must receive approval from the Authority before making any such changes.

The completed application and any supporting information, including the Renewal Advisory, should be mailed to our bank lockbox address of:

**M&T Bank Lockbox
New York State Liquor Authority
PO Box 8000-Dept 930
Buffalo, New York 14267**

BOND IN SUPPORT OF APPLICATION FOR LICENSE OR PERMIT
UNDER THE NEW YORK ALCOHOLIC BEVERAGE CONTROL LAW

Application Number	Bond Number	This bond expires in 2013	Penal Sum of Bond \$ 1000.00 Plus Costs
--------------------	-------------	------------------------------	--

KNOW ALL MEN BY THESE PRESENTS, that we

Name of Applicant Starjem Restaurant Inc. DBA Fresco By Scotti	Address of Place of Business of 34 East 52nd Street aka 405 Madison Avenue, New York State of New York 10022
in the county of Manhattan	as Principal, and
Name of Insurance Company WESTERN SURETY COMPANY	Address of Office or usual Place of Business 100 Park Avenue, New York, NY 10017

a surety company approved by the Superintendent of Insurance of New York State as to solvency and responsibility and authorized to transact business in New York State, as Surety, are held and firmly bound unto the People of the State of New York in the penal sum set forth above and for the payment of any costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1,000.00) for the payment of which sum or sums, well and truly to be made, we, the said principal and surety, bind ourselves, successors, and assigns, respectively, jointly and severally, firmly by these presents.

WHEREAS, the above bounden principal is making application to the New York State Liquor Authority, for a license or permit under the Alcoholic Beverage Control Law and the said State Liquor Authority, by Part 81 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the Authority), having required the principal to file with it a bond to the People of the State of New York, as provided in said Law aforesaid,

NOW, THEREFORE, the conditions of this obligation are such that if the said license or permit applied for, which expires on the date designated in said license or permit, is granted to the said principal and the principal will not, during the license or permit period, suffer or permit any violation of the provisions of the Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or give cause, as provided in the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the State Liquor Authority), for the cancellation, revocation or suspension of said license or permit or the issuance of an order of warning and will pay all fines and penalties which shall accrue thereunder, together with all costs taxed or allowed in any action or proceeding brought or instituted for a violation of any of the provisions of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or for cause for the cancellation, revocation or suspension or issuance of an order of warning as provided in the Alcoholic Beverage Control Law or Rules of the Authority, or costs taxed or allowed in any review pursuant to Section 121 of the Alcoholic Beverage Control Law; then this obligation shall be void; otherwise to remain in full force and effect; subject, however, to the following conditions:

1. An action for the breach of any condition of this bond may be maintained without previous conviction or prosecution for the violation of any provision of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by the State Liquor Authority, or for cause as provided by the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the Authority).
2. The aggregate liability of the surety on account of any and all defaults hereunder shall in no event exceed the penal sum of this bond plus costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1000.00).
3. Upon the payment of any loss arising under this bond, the surety shall be subrogated to the rights and remedies of the obligee against the principal to recover from the principal any amount so paid.
4. Any action brought for the penal sum of this bond shall be commenced within twenty-four months after the expiration of the license or permit period aforementioned, or for costs within one year after final disposition of any action or proceeding. In the event of the institution of any action or proceeding to review the Authority's determination, the period of 24 months shall not commence until the final determination of the proceeding or litigation.
5. This bond shall be effective during the time the aforementioned license or permit shall be in effect and during any extension thereof.
6. A breach of any condition of this bond shall be deemed to have been established by the revocation, cancellation or suspension of the aforesaid license or permit or the issuance of an order of warning by the State Liquor Authority unless said revocation, cancellation, suspension or order of warning shall have been reversed or annulled by a Court of competent jurisdiction.
7. In any action or proceeding to recover on this bond, the principal and the company named herein as Surety waive any defense based upon any defect in the bond, including, but not limited to, an erroneous, improper or defective insertion or omission to insert or apparent alteration of the expiration year and/or amount of the penal sum of the bond and further waive any objection that the bond bears a printed, typewritten or facsimile signature. Any bond filed with the State Liquor Authority shall be admissible in evidence in any court on application of the State Liquor Authority or People of the State of New York without further proof of due execution thereof by or on behalf of the principal and surety and shall be conclusively presumed to have been duly executed by and on behalf of the principal and surety. Any bond filed with the State Liquor Authority and bearing the printed or facsimile name of the surety or the typewritten or facsimile signature of its representative shall be conclusively presumed to be the duly issued bond of the surety company and binding on it, its successors and assigns for the amount specified in Part 81 of Subtitle B of Title 9 of the Official Compilation of Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the State Liquor Authority).

IN WITNESS WHEREOF the parties hereto have caused these presents to be signed and sealed this
15th day of September, 2011
Name of issuing agency Global Coverage, Inc. Address New York, NY 10016-2897
Phone # (212) 683-2622

Starjem Restaurant Inc. DBA Fresco By
Scotti
Principal (Applicant/Licensee)

Western Surety Company
BY: Paul T. Bruffat, Senior Vice President L. S.

EXCISE BOND UNDERWRITERS

15 MAIDEN LANE, SUITE 800 • NEW YORK, N.Y. 10038

09/21/11
BOND IN SUPPORT OF APPLICATION FOR LICENSE OR
PERMIT UNDER THE NEW YORK ALCOHOLIC
BEVERAGE CONTROL LAW

LIQUOR

*** RIDER *** RIDER ***
*** EFFECTIVE 09/21/11 ***
*** CHANGE OF NAME-ADDRESS ***

BOND NUMBER

OCTOBER, 2011

Penal Sum of Bond

1,000.00

Plus Costs



NOW ALL MEN BY THESE PRESENTS, that we,

Address of Place of Business

Name of Applicant

STARJEM RESTAURANT CORP.

34 EAST 52ND STREET
A/K/A 485 MADISON AVENUE
NEW YORK NY 10022

the county of NEW YORK

State of NEW YORK as Principal, and THE HANOVER INSURANCE COMPANY

having an office and usual place of business at

330 SOUTH RANDOLPHVILLE ROAD
PISCATAWAY NJ 08854

a surety company approved by the Superintendent of Insurance of New York State as to solvency and responsibility and authorized to transact business in New York State, as Surety, are held and firmly bound unto the People of the State of New York in the penal sum set forth above and for the payment of any costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1,000.00) for the payment of which sum or sums, well and truly to be made, we, the said principal and surety, bind ourselves, successors, and assigns, respectively, jointly and severally, firmly by these presents.

WHEREAS, the above bounden principal is making application to the New York State Liquor Authority, for a license or permit under the Alcoholic Beverage Control Law and the said State Liquor Authority, by Part 81 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the Authority), having required the principal to file with it a bond to the People of the State of New York, as provided in said Law aforesaid.

NOW, THEREFORE, the conditions of this obligation are such that if the said license or permit applied for, which expires on the date designated in said license or permit, is granted to the said principal and the principal will not, during the license or permit period, suffer or permit any violation of the provisions of the Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or give cause as provided in the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the State Liquor Authority), for the cancellation, revocation or suspension of said license or permit or the issuance of an order of warning, and will pay all fines and penalties which shall accrue thereunder, together with all costs taxed or allowed in any action or proceeding brought or instituted for a violation of any of the provisions of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or for cause for the cancellation, revocation or suspension or issuance of an order of warning as provided in the Alcoholic Beverage Control Law or Rules of the Authority, or costs taxed or allowed in any review pursuant to Section 121 of the Alcoholic Beverage Control Law; then this obligation shall be void; otherwise to remain in full force and effect; subject, however, to the conditions stated on reverse side.

IN WITNESS WHEREOF the parties hereto have caused these presents to be signed and sealed this 23 day of SEPTEMBER

2011

STARJEM RESTAURANT CORP

Principal (Applicant/Licensee)

L.S.

BY:

Moriri Scott

THE HANOVER INSURANCE COMPANY



APPLICANT MUST SIGN HERE

John L. Corneau

Attorney-in-fact

(OVER)



Western Surety Company

Rider to be attached to Bond No. [REDACTED]

NEW YORK LIQUOR BOND RIDER

This rider is valid only when used to amend Retail On and Off Premises Bonds (Bond Form L-9, prescribed by the New York State Liquor Authority, June 3, 1974) where the penalty does not exceed One Thousand Dollars (\$1,000).

It is hereby mutually agreed and understood by and between the Principal, Starjem Restaurant Inc.

dba Fresco By Scotto, and Western Surety Company, a corporation organized and existing under the laws of the State of South Dakota and authorized to transact business in New York State, as Surety, that

☐

the principal's address on this bond has been changed as follows:

☒

the principal(s) on this bond has(have) been changed as follows:

Starjem Restaurant Corp. dba Fresco By Scotto

☐

the _____ date(s) of
(enter effective date or expiration date or both)
this bond has(have) been changed as follows:

☐

This bond is amended to include additional space included in the licensed premises:

☐

The county has been amended to:

Nothing herein contained shall be held to vary, alter, waive, or extend any of the terms, limits, or conditions of the bond, except as hereinabove set forth.

This rider becomes effective on the 28th day of September, 2011, at twelve and one minute o'clock a.m., standard time.

Signed this 28th day of September, 2011.

BY:

Mauro Scotto
Principal

WESTERN SURETY COMPANY, Surety

BY:

Paul T. Bruflat
Paul T. Bruflat, Senior Vice President

7010 2780 0001 8601 5514

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

NEW YORK # 10123 **OFFICIAL USE**

Postage	\$	00.44
Certified Fee		02.85
Return Receipt Fee (Endorsement Required)		02.30
Restricted Delivery Fee (Endorsement Required)		00.00
Total Postage & Fees	\$	05.59

0010

22

Postmark
Here

09/13/2011

Sent To
MANHATTAN COMMUNITY BOARD NO. 5
 Street, Apt. No.
 or PO Box No. **450 SEVENTH AVENUE, ROOM 2109**
 City, State, ZIP+4
NEW YORK, NEW YORK 10123

ROBERT V. FERRARI

ATTORNEY AT LAW

630 THIRD AVENUE, NEW YORK, N.Y. 10017

(212) 972-7040

TELECOPIER (212) 922-1939

E-MAIL: rvf@rvferrari.com

MICHAEL FERRARI

mf@rvferrari.com

September 12, 2011

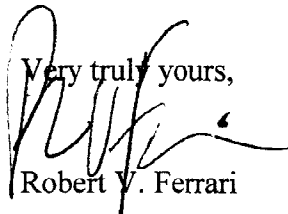
Community Board No. 5
450 Seventh Avenue, Room 2109
New York, New York 10123

Re: Starjem Restaurant Inc
d/b/a Fresco By Scotto
34 East 52nd Street a/k/a 485 Madison Avenue
New York, New York 10022

Dear Sir/Madam,

Enclosed is Renewal Application Notice Form from the State Liquor Authority.

This is being sent pursuant to the Alcoholic Beverage Control Law.

Very truly yours,

Robert V. Ferrari

Enclosure

Via Certified Mail/
Return Receipt Requested

Robert V. Ferrari - 630 Third Avenue, 16th Floor, New York, NY 10017

Email - rvf@rvferrari.com, Tel. (212) 972-7040, Fax (212) 922-1939



STATE OF NEW YORK
EXECUTIVE DEPARTMENT
DIVISION OF ALCOHOLIC BEVERAGE CONTROL
STATE LIQUOR AUTHORITY

Standardized **NOTICE FORM** for Providing a
30-Day Advance Notice to a Local Municipality or Community Board

in connection with the submission to the State Liquor Authority of a (check one)

New Application ☐ **Renewal Application** ☒

Alteration Application ☐

for an On-Premises Alcoholic Beverage License

1	Date the original copy of this Notice was mailed to the Local Municipality or Community Board.		Month	0	Day	9	Year	1	2	2	0	1	1						
THIS 30-DAY ADVANCE NOTICE IS BEING PROVIDED TO THE CLERK OF THE FOLLOWING LOCAL MUNICIPALITY OR COMMUNITY BOARD																			
2	Name of the Local Municipality or Community Board		Manhattan Community Board No. 5																
FOR NEW APPLICANTS, PROVIDE DESCRIPTION BELOW USING ALL INFORMATION KNOWN TO DATE FOR ALTERATION APPLICANTS, ATTACH COMPLETE DESCRIPTION AND DIAGRAM OF PROPOSED ALTERATION(S) FOR CURRENT LICENSEES, SET FORTH APPROVED METHOD OF OPERATION ONLY DO NOT USE THIS FORM TO CHANGE YOUR METHOD OF OPERATION																			
3	Type(s) of alcohol sold or to be sold under the license (check one)		<input type="checkbox"/> Beer Only <input type="checkbox"/> Wine and Beer Only <input checked="" type="checkbox"/> Liquor, Wine, and Beer																
4	Extent of food service (check one)		<input checked="" type="checkbox"/> Restaurant (Sale of food primarily, full food menu, kitchen run by chef) <input type="checkbox"/> Tavern / Cocktail Lounge / Adult Venue / Bar (Alcohol sales primarily - meets legal minimum food availability requirements)																
5	Type of establishment (check all that apply)		<input type="checkbox"/> Hotel <input type="checkbox"/> Live Music <input type="checkbox"/> Disk Jockey <input type="checkbox"/> Juke Box <input type="checkbox"/> Patron Dancing (Small Scale) <input type="checkbox"/> Cabaret, Night Club, Discotheque (Large Scale Dance Club) <input type="checkbox"/> Capacity for 600 or more patrons <input type="checkbox"/> Club (e.g. Golf / Fraternal Org.) <input type="checkbox"/> Bed & Breakfast <input type="checkbox"/> Catering Facility <input type="checkbox"/> Karaoke Bar <input type="checkbox"/> Topless Bar <input checked="" type="checkbox"/> Restaurant <input type="checkbox"/> Recreational Facility (Sports Facility/Vessel)																
6	Licensed outdoor area		<input checked="" type="checkbox"/> None <input type="checkbox"/> Rooftop <input type="checkbox"/> Patio or Deck <input type="checkbox"/> Freestanding Covered Structure <input type="checkbox"/> Garden / Grounds <input type="checkbox"/> Sidewalk Cafe <input type="checkbox"/> Other (Specify)																
7	Will the license holder or a manager be physically present within the establishment during all hours of operation? (check one)												<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO					
8	License serial number		1027039		9		Expiration Date		Month	1	Day	0	Year	3	1	2	0	1	1
10	The applicant's or license holder's full name, as it appears or will appear on the license		Starjem Restaurant Inc.																
11	The trade name, if any, under which the establishment conducts or will conduct business.		Fresco By Scotto																
12	The establishment is located within the building which has the following street address:		34 East 52nd Street aka 485 Madison Avenue																
13	City, Town, or Village:		New York		NY		Zip Code 10022												
14	The establishment is located on the following floor(s) of the building at the above address		Basement, First Floor, Mezzanine																
15	Within the building at the above address, the establishment is located within the room(s) numbered as follows		NA																
16	Business telephone number of applicant/licensee		2 1 2 - 9 3 5 . 3 4 3 4																
17	Business fax number of applicant/licensee																		
18	Business e-mail address of applicant/licensee		marion@frescobyscotto																
19	Does the applicant or license holder own the building in which the establishment is located? (check one)		Yes <input type="checkbox"/> If "YES", SKIP items No. 20-23. Complete the 3 entries at item No. 24. No <input checked="" type="checkbox"/> If "NO", ANSWER items No. 20-23, and complete the 3 entries at item No. 24.																
OWNER OF THE BUILDING IN WHICH THE LICENSED ESTABLISHMENT IS LOCATED																			
20	Building owner's full name is		485 Madison Associates																
21	Building owner's street address		110 East 59th Street																
22	City, Town, or Village		New York		NY		Zip Code 10022												
23	Business telephone number of building owner:		2 1 2 - 4 2 1 - 1 3 0 0																
24	I am the applicant or hold the license or am a principal of the legal entity that holds or is applying for the license. Representations in this form are in conformity with representations made in submitted documents relied upon by the Authority when granting the license. I understand that representations made in this form will also be relied upon, and that false representations may result in disapproval of the application or revocation of the license. By my signature, I affirm - under Penalty of Perjury - that the representations made in this form are true.																		
Printed Name		Marion Scotto		Title		Member		x <i>Marion Scotto</i>											



OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

-136

STATE OF NEW YORK
NOTICE OF APPEARANCE

1027039

Section 166 of the Executive Law requires a regulatory agency to maintain for public inspection, a record of who appears before it, for a fee as a third party (i.e., an attorney, an agent, lobbyist*, or representative) on behalf of a person or organization subject to the regulatory jurisdiction of the agency. This usually occurs when the third party's client is involved in an enforcement, formal permit, or application matter. *This form is subject to all the rules and regulations of the Freedom of Information Law. Information that is confidential as a matter of law need not be furnished.*

Agency: NY State Liquor Authority**Date:** October 5, 2011**Division/Bureau:** Renewals**1. Name of individual appearing:** Robert V. Ferrari**Address:** 630 Third Avenue, 16th Floor, New York, New York 10017**Telephone:** (212) 972-7040**2. Client represented:** Starjem Restaurant Corp. d/b/a Fresco By Scotto, Serial No. - 1027039**Address:** 34 East 52nd Street a/k/a 485 Madison Avenue, New York, New York 10022**Telephone:** (212) 935-3434**3. Subject of appearance:** ☒ **Regulatory/Enforcement** ☐ **Lobbying**

Filing application for renewal of the above on-premises liquor license.

4. Acting in capacity of:☒ **Attorney** ☐ **Lobbyist** ☐ **Agent**
☐ **Other (describe)** _____**5. Are you being compensated?** ☒ **Yes** ☐ **No**If YES, Check FEE or SALARY ☒ **FEE** ☐ **SALARY****6. Signature of individual appearing:****7. Agency official (print name):** _____**Signature:** _____

*A LOBBYIST is a person or organization, other than a New York State government employee acting in an official capacity, who appears for the purpose of influencing the adoption or rejection of proposed rules, regulations, rates, legislation, including the State budget or the specification or award of a State Procurement Contract. An "appearance" for lobbying purposes can be a personal visit, letter, telephone call, conversation at a meeting, or any other type of contact, but does not include "on the record" proceedings or hearings.

ROBERT V. FERRARI

ATTORNEY AT LAW

630 THIRD AVENUE, NEW YORK, N.Y. 10017

(212) 972-7040

TELECOPIER (212) 922-1939

E-MAIL: rvf@rvferrari.com

MICHAEL FERRARI

mf@rvferrari.com

October 6, 2011

Via USPS Express Mail
New York State Liquor Authority
80 South Swan Street
Albany, New York 12210-8002
Attention: Renewals

Re: Starjem Restaurant Inc. (the "Licensee")
Serial No. - 1027039
License Expiration - 10/31/2011

Dear Sir/Madam:

Attached hereto is completed State Liquor Authority ("SLA") application for renewal of the Licensee's on -premises liquor license and supporting papers.

Upon examination of the Licensee's records, it came to my attention that the entity name "Starjem Restaurant Inc." is not the correct entity name. The original license application was filed by Licensee's prior attorney and contains a wholly incorrect entity name. The current license in effect will expire on October 31, 2011 which necessitated the filing of the renewal with the correct information which currently is not reflected on the SLA website. I understand that the examiners of renewal applications refer to the information contained on the website for the accuracy of information on the renewal forms. In an effort to correct the original error and avoid issues with their renewal, I am enclosing copy of endorsement application which was filed on September 27, 2011. In support of the application submitted herewith is filing receipt from New York State Secretary of State showing the correct name, copy of filing receipt from NYS division of corporations for the Licensee's trade name "Fresco By Scotto" issued to the correct entity and certificate of authority to collect sales taxes showing the correct name.

My client is struggling like so many other establishments during this difficult economic period and with the license expiration date rapidly approaching my client is concerned that it will be without its liquor license considering the timing of the filing of both applications. This would be a hardship that they cannot afford.

Sincerely,


Robert V. Ferrari

Enclosure



OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

-136

STATE OF NEW YORK
NOTICE OF APPEARANCE

Section 166 of the Executive Law requires a regulatory agency to maintain for public inspection, a record of who appears before it, for a fee as a third party (i.e., an attorney, an agent, lobbyist*, or representative) on behalf of a person or organization subject to the regulatory jurisdiction of the agency. This usually occurs when the third party's client is involved in an enforcement, formal permit, or application matter. *This form is subject to all the rules and regulations of the Freedom of Information Law. Information that is confidential as a matter of law need not be furnished.*

Agency: NY State Liquor Authority**Date:** September 27, 2011**Division/Bureau:** Licensing**1. Name of individual appearing:** Allison During (of Law Office of Robert V. Ferrari)**Address:** 630 Third Avenue, 16th Floor, New York, New York 10017**Telephone:** (212) 972-7040**2. Client represented:** Starjem Restaurant Inc.**Address:** 34 East 52nd Street aka 485 Madison Avenue, New York, New York 10022**Telephone:** (212) 935-3434**3. Subject of appearance:** ☒ **Regulatory/Enforcement** ☐ **Lobbying**

Filing application for Endorsement Certificate.

4. Acting in capacity of:☐ **Attorney** ☐ **Lobbyist** ☐ **Agent**
☒ **Other (describe)** Paralegal**5. Are you being compensated?** ☒ **Yes** ☐ **No**If YES, Check FEE or SALARY ☐ **FEE** ☒ **SALARY****6. Signature of individual appearing:** **7. Agency official (print name):** _____**Signature:** _____

*A LOBBYIST is a person or organization, other than a New York State government employee acting in an official capacity, who appears for the purpose of influencing the adoption or rejection of proposed rules, regulations, rates, legislation, including the State budget or the specification or award of a State Procurement Contract. An "appearance" for lobbying purposes can be a personal visit, letter, telephone call, conversation at a meeting, or any other type of contact, but does not include "on the record" proceedings or hearings.



State of New York
Liquor Authority

APPLICATION FOR ENDORSEMENT CERTIFICATE

-87

Section A

Serial Number of License To Be Changed: 1027039	County New York	Telephone # (212) 935-3434
Full Name Of Licensee As Listed On The License Certificate Starjem Restaurant Inc.	Trade Name (DBA) As Listed On The License Certificate None	
Street Address Of Licensed Premises 34 East 52nd Street a/k/a 485 Madison Avenue	Post Office Address, <i>if different than premises</i>	
City, Town or Village & Zip Code New York, New York 10022	City, Town or Village & Zip Code, <i>if different</i>	
Current FEIN#: 11-3139531		

Section B

Proposed License Name Change: Starjem Restaurant Corp.		Proposed Trade Name (DBA) Change: None
Address of Licensed Premises, <i>if different than above:</i>		Post Office of Premises, <i>if different than above:</i>
City, Town or Village, <i>if different than above:</i>	County, <i>if different:</i>	City, Town or Village, <i>if different:</i>
Proposed FEIN#: No change		

Section C

Change Requested: Check All That Apply

Fee Required

- | | |
|---|--|
| 1. () The Post Office or Local Government is changing the Street name or numerical designation of the licensed premises | \$ |
| 2. (X) The correction of a typographical error in the original license. | 0 |
| 3. () Amend corporate name of the licensed premises, no change in ownership or corporate entity. | 0 |
| 4. () Change in principal name due to marriage or divorce | 0 |
| 5. () Add/Change the Holding Corporation | 0 |
| 6. () Change from a Sole Proprietorship to a Corporation/LLC | \$13 |
| 7. () Change from a Corporation/LLC to a Sole Proprietorship where the Sole Proprietor was the Sole Principal of the Corporation/LLC | \$13 |
| 8. () Death of Licensee (individual), Appointment of Executor or Administrator | In this section:
-If your license is a Grocery/Drug Store
the fee for Each box checked is: \$13 |
| 9. () Death of Licensee (partner), Appointment of Executor or Administrator | |
| 10. () Receiver or Trustee | -For all other license types, the fee for
Each box checked is: \$64 |
| 11. () Assignee for Benefit of Creditors | |
| 12. () Guardian | |
| 13. () Trustee in Bankruptcy | |
| 14. () Dissolution of Partnership, with transfer to remaining partners | |
| 15. () Addition of a Partner | |

Total Fee Due: \$ 0.00

Section D**Identification of Individuals**

Part 1. Identification of decedents, incompetents, partners and donors whose position or interest has *changed or ended* in connection with the changes requested in Section C.

Name	Current Title	Current Percentage of Interest	Current No. of Shares
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Part 2. List below the names of all entities, officers, directors, individual stockholders, individual partners, assignees, receivers, trustees, executors or guardians that are *new parties* in interest in the subject license.

Name	Proposed Title	Proposed Percentage of Interest	Proposed No. of Shares
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Part 3. Identification of owners and individuals *remaining* in interest in the subject license.

Name	Title	Percentage of Interest	No. of Shares
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

All parties listed in Part 2 above must complete a Personal Questionnaire as well as submit an original color photo, photo ID and Proof of Citizenship for themselves. Electronic fingerprinting of each new principal, after submission of application (fee of \$105 to be paid at L-1 Services) is also required.

Note: For any of the above, if financing is involved, please give details and supply copies of contracts, agreements, leases or any other legal document.

Section E

The licensee represents that there have been no changes other than those set forth herein, in any of the facts required to be set forth in the application for license, and agrees that any application filed by it or by any of its officers, directors or stockholders, for any license or permit under the Alcoholic Beverage Control Law, and the occupation record submitted herewith, shall be deemed and made a part hereof and considered by the Authority in acting upon this Application for Endorsement Certificate.

I/We, the Applicant(s) also certify that all papers filed in support of this application or any application filed under the Alcoholic Beverage Control Law by any person having an interest, direct or indirect, either in the business to be licensed or any license or permit shall be deemed a part hereof and considered by the State Liquor Authority in acting upon this application.

I/We understand that the information I/we submit will be relied on by the State Liquor Authority in acting on this application. I/we understand that any false statements or misrepresentations shall constitute sufficient cause for the disapproval of the applications and/or revocation, cancellation or non-renewal of any license which is issued or affected as a result of such application.

I/We verify that all of the above statements are true. If any of the above information changes prior to receipt of the license or approval of the endorsement, I/we will notify the Authority by registered or certified mail within 48 hours. If any changes occur after the issuance of the license or approval applied for, I/we understand that failure to give the required notice may constitute a violation of Section 110 of the Alcoholic Beverage Control Law and/or Rule 36.1(j) of the State Liquor Authority and will result in proceedings to revoke, cancel or suspend such license.

I/We, the Applicant(s) certify that there are no financial transactions involved concerning the license applied for EXCEPT as described herein.

I/We, the Applicant(s) noted on this application certify that I/we know and attest to the validity of the contents of the above application and the statements contained therein.

Signature of Each Partner or General Partner, LLC Managing Member or a Corporate Officer currently licensed.

By Starjem Restaurant Corp. Date _____
Marion Scott Date 9/23/11
Marion Scott, President

Official Use Only:

Approved

Disapproved

by: _____ Date: _____

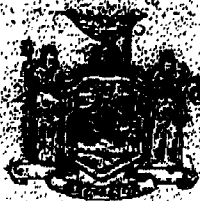
New York State Department of Taxation and Finance

Certificate of Authority

Identification number



(Indicate this number on all returns and correspondence)



VALIDATED

11/18/2009

Dept of Tax
and Finance

STARJEM RESTAURANT CORP.
FRESCO RESTAURANT
34 E 52ND ST
NEW YORK NY 10022-5914

is authorized to collect sales and use taxes under Articles 28 and 29 of the New York State Tax Law.

Nontransferable

This certificate must be prominently displayed at your place of business.
Fraudulent or other improper use of this certificate will cause it to be revoked.
The certificate may not be photocopied or reproduced.

1050231080098

10C3 - 3230835 P0000120 - 01

N. Y. S. DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

ALBANY, NY 12231-0001

FILING RECEIPT

=====

ENTITY NAME : STARJEM RESTAURANT CORP.

DOCUMENT TYPE : ASSUMED NAME CERTIFICATE

=====

FILER:

FILED: 09/26/2011

CASH#: 266796

FILM#: 20110926047

ROBERT V. FERRARI

630 THIRD AVENUE

16TH FL.

NEW YORK

NY

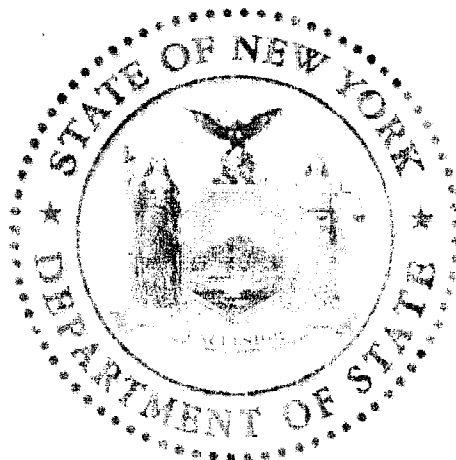
10017

PRINCIPAL LOCATION

34 EAST 52ND STREET

NEW YORK

NY 10022



COMMENT:

ASSUMED NAME

FRESCO BY SCOTTO

=====

SERVICE COMPANY : +++ NO SERVICE COMPANY +++

CODE:

BOX :

FEES 150.00

FILING : 25.00

COUNTY : 100.00

COPIES : .00

MISC : .00

HANDLE : 25.00

PAYMENTS: 150.00

CASH :

CHECK :

C CARD : 150.00

REFUND :

FILING RECEIPT

=====

CORPORATION NAME: STARJEM RESTAURANT CORP.

DOCUMENT TYPE : INCORPORATION (DOM. BUSINESS)

COUNTY: KING

SERVICE COMPANY : BLACKSTONE CORPORATE SERVICES

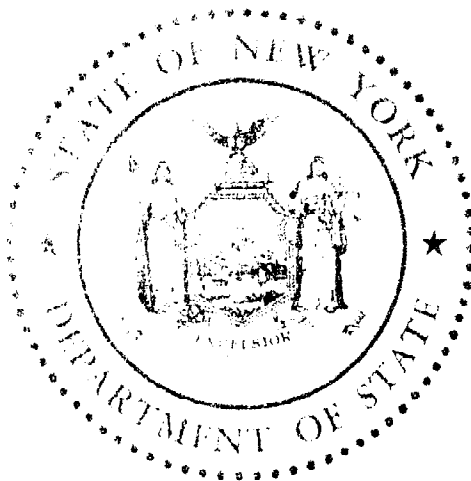
=====

FILED: 10/19/1992 DURATION: PERPETUAL CASH #: 921019000064 FILM #: 921019000005

ADDRESS FOR PROCESS

THE CORP.
220 11TH AVENUE
BROOKLYN, NY 11228

REGISTERED AGENT



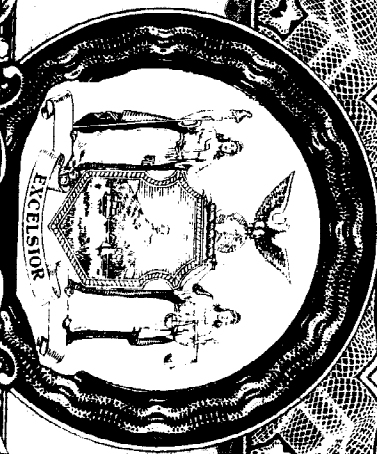
STOCK: 200 NFV

=====

FILER	FEE	AMOUNT	PAYMENTS	AMOUNT
DUBLIRER HAYDON STAARCI & VICTOR	FILING	125.00	CASH	0.00
17 BATTERY PLACE	TAX	10.00	CHECK	0.00
NEW YORK, NY 10004	CERT	0.00	BILLED	160.00
	COPIES	0.00		
	HANDLING	25.00		
			REFUND	0.00

=====

ON-PREMISES LIQUOR LICENSE
SERIAL #: 1027039
COUNTY: NEW YORK



EFFECTIVE DATE: 10/17/2011
EXPIRATION DATE: 10/31/2013
CERTIFICATE #: 800340

NEW YORK STATE LIQUOR AUTHORITY

THE LICENSEE DESIGNATED BELOW IS HEREBY GRANTED PERMISSION, UNDER THE ALCOHOLIC BEVERAGE CONTROL LAW TO TRAFFIC IN ALCOHOLIC BEVERAGE PURSUANT TO THE TYPE OF LICENSE INDICATED IN THE UPPER LEFT HAND CORNER OF THIS CERTIFICATE AND ACCORDING TO THE STATUTES AND REGULATIONS PERTAINING THERETO.

THIS LICENSE SHALL NOT BE TRANSFERABLE TO ANY OTHER PERSON OR TO ANY OTHER PREMISES OR TO ANY OTHER PART OF THE BUILDING CONTAINING SUCH LICENSED PREMISES. IT SHALL NOT BE DEEMED A PROPERTY OR VESTED RIGHT AND MAY BE REVOKED AT ANY TIME PURSUANT TO LAW

METHOD OF OPERATION

RESTAURANT SERVING BEER WINE AND LIQUOR

STARJEM RESTAURANT CORP
FRESCO BY SCOTTO
34 E 52ND STREET
NEW YORK NY 10022

FILING FEE \$90.00
LICENSE FEE \$4,352.00

Dennis Rosen
Dennis Rosen
Chairman

BEFORE COMMENCING OR DOING ANY BUSINESS FOR THE TIME FOR WHICH THIS LICENSE HAS BEEN ISSUED, THE SAID LICENSEE SHALL BE ENCLOSED IN A SUITABLE WOOD OR METAL FRAME, HAVING A CLEAR GLASS SPACE AND A SUBSTANTIAL WOOD OR METAL BACK SO THAT THE WHOLE OF SAID LICENSE MAY BE SEEN THEREIN, AND SHALL BE POSTED UP AND AT ALL TIMES DISPLAYED IN A CONSPICUOUS PLACE IN THE ROOM WHERE SUCH BUSINESS IS CARRIED ON, SO THAT ALL PERSONS VISITING SUCH PLACE MAY READILY SEE THE SAME.

Certificate No. B800340

FOLD AND TEAR HERE

FOLD AND TEAR HERE

RENEWAL ADVISORY**RECEIVED** OCT 15 2013**Serial #: 1027039****NEW/OP / 252****New Effective Date: 11/01/2013****New Expiration Date: 10/31/2015****License Fee: \$4,352.00****Filing Fee: \$90.00****630 250****TOTAL FEE DUE: \$4,442.00****Premises Address:****STARJEM RESTAURANT CORP****34 E 52ND STREET AKA 485 MADISON AVENUE****NEW YORK, NY 10022**

This letter is to notify you that your current license is due to expire on 10/31/2013. The renewal procedures have changed so please review all forms / instructions carefully.

THIS IS THE ONLY NOTIFICATION YOU WILL RECEIVE.

The renewal application form can be found on the Authority's website at www.sla.ny.gov/renewals

You must complete the renewal application and return it with this renewal advisory to the address below:

**M&T Bank Lockbox
New York State Liquor Authority
PO Box 8000-Dept 930
Buffalo, New York 14267**

You must include this renewal advisory, the completed renewal application, appropriate fee and all other required documents.

The required Community Board notice form for New York City on-premises licensees is also available on our website. You must notify the Community Board at least 30 days prior to sending the renewal forms to the Authority.

NOTE: Renewal applications must be mailed to the address shown above. Applications sent to any other address will be returned and will delay the processing of your renewal.

RENEWAL APPLICATION / INSTRUCTION FORM

PLEASE ALLOW TEN(10) BUSINESS DAYS FOR PROCESSING. BE ADVISED THAT ANY DEFICIENCY IN THE APPLICATION OR FAILURE TO PROVIDE ALL SUPPORTING DOCUMENTATION WILL DELAY THE PROCESSING OF YOUR RENEWAL OR MAY LEAD TO THE DISAPPROVAL OF YOUR RENEWAL.

The following documents are required to be submitted by all NYS Retail Licensees:

- ☒ Renewal Advisory
- ☒ Completed Renewal Application form (all pages)
- ☒ Submit a check or money order payable to New York State Liquor Authority in the total amount as shown on the Renewal Advisory.

Original surety bond in the appropriate amount; **SIGNED BY THE LICENSEE**; and with the expiration of the bond ☒ being the same as the license expiration date on the Renewal Advisory. The bond must have the premises name and address typed exactly as it appears on your license certificate.

REQUIRED FOR NEW YORK CITY ON-PREMISES LICENSEES ONLY:

- ☒ Submit a copy of the *Standardized Notice Form for providing a 30-Day Advance Notice to a local Community Board* as required by Section 110 (b)(b) of the ABC Law that was sent to the Community Board. This section of the ABC Law requires that all on-premises licensees (whether licensed for beer; beer& wine; or beer, wine & liquor) located within the city of New York notify the Community Board that they are renewing their license.

- Also submit proof of how the *Standardized 30-day Notice Form to the Community Board* was sent which consists of:
- ☒ a. A copy of the certified mail receipt or a copy of the certified mail card - return receipt requested; or
 - b. A copy of the delivery receipt from a commercially recognized delivery service; or
 - c. A copy of the Standardized Notice Form form date-stamped by the Community Board.

If applicable, submit the following:

- ☒ Notice of appearance if an attorney or representative assisted in completing this renewal application.

☐ If the Trade Name has changed since the last renewal filing you must also include an Assumed Name Filing Receipt from the NYS Dept. of State (for a corporation, Inc, LLC, LP or Ltd.) or a Business Certificate from the County Clerk's office (for sole proprietors) with the renewal application.

The only change that can be made during the Renewal process is the Trade Name (DBA) change. If there have been any changes to the principals of the license, any physical changes to the establishment or changes to the approved method of operation you must file the appropriate change application that can be found on our website at: www.sla.ny.gov. You must receive approval from the Authority before making any such changes.

The completed application and any supporting information, including the **Renewal Advisory**, must be mailed to the address below:

**M&T Bank Lockbox
New York State Liquor Authority
PO Box 8000-Dept 930
Buffalo, New York 14267**

ALL SECTIONS MUST BE COMPLETED IN ORDER TO APPROVE YOUR RENEWAL**1. Licensed Premises Information**Is your licensed premises closed? ☐ YES ☒ NOIf yes, is your license in safekeeping with the Authority? ☐ YES ☐ NOIf yes, do you wish for your license to remain in Safekeeping at Renewal? ☐ YES ☐ NOIf yes to any of the above, submit a statement giving the reason that the license is in Safekeeping and the date that is planned for the premises to re-open. *Please be aware that licenses cannot remain in Safekeeping for an indefinite period of time.*

Licensed Premises Name: Starjem Restaurant Corp.

License Serial #: 1027039

Trade Name (if applicable): Fresco By Scotto

Federal Employer Identification Number: [REDACTED]

1a. Method of Operation: The following questions must be answered by all On-Premises license holders, including beer, beer & wine, or beer, wine & liquor

Section 109 of the ABC Law requires a statement to be submitted indicating the type of establishment operated at the premises.

If you hold an **on-premises** license, please select the method of operation from the following list:

- ☒ Restaurant ☐ Catering Establishment ☐ Club (i.e., Fraternal Org) ☐ Hotel ☐ Bed & Breakfast ☐ Ball Park/Stadium/Arena
☐ Bar/Tavern ☐ Sports Bar ☐ Cabaret ☐ Night Club/Dance Club ☐ Adult Entertainment ☐ Country Club/ Golf Course

If dancing is permitted at the premises, who is be permitted to dance? ☐ Patrons ☐ Employees for entertainment ☐ BothIf dancing is permitted, is there exotic dancing including, but not limited to, pole dancing and/or lap dancing? ☐ YES ☐ NOIs there topless entertainment at the premises? ☐ YES ☐ NO

Please list any condition(s) or stipulation(s) associated with your current license that were agreed to with the local Municipality/ Community Board or placed on your license by the Authority. Attach additional sheets if necessary.

None

1b. Address of the Licensed Premises

If your address has been changed as a result of a 911 change, please provide proof of the change such as notification of the 911 address change from the local Municipality/Community Board.

Licensed Premises Address: 34 East 52nd Street a/k/a 485 Madison Avenue

City: New York

State: New York

Zip Code: 10022

County: New York

Email Address:

Elaina@frescobyscotto.com
Marion@frescobyscotto.com

Premises Telephone # (include area code): (212) 935-3434

Contact Phone # (include area code): (212) 972-7040

Mailing Address (if different than premises address)

Mailing Address:

City:

State:

Zip Code:

1c. Landlord/Building Owner Name and Address - also required if building is owned by the licensee

Landlord Name:

Address:

City: State: Zip Code:

2. Arrest/Conviction Information

Has the applicant or (If partnership) any of the partners, or (if a corporation) any of the officers, directors, stockholders, or any agent or employee of the applicant, been **ARRESTED** and/or **CONVICTED** during this renewal period (including pleas of guilty or suspended sentences) of any felony or of any other crime or offense of any kind except minor traffic violations?

☐ YES ☒ NO ☐ Previously Reported

If YES, complete the chart below. Submit a Police Report, Certificate of Disposition, Certificate of Conviction or a Certificate of Relief from Disabilities from the Court Clerk for each case. If the charge(s) are not complete submit documentation showing your next court appearance. If necessary, attach additional sheets.

Name of the Defendant	Connection with Licensed Premise (licensee, officer)	Date of Offense	Nature of the arrest and/or conviction	Disposition

3. Applicant Information and Certification

The signature below certifies that I know the contents of this application and the statements contained therein; that the same are true of my own knowledge; and that I am authorized to execute this application and sign this certification. I further certify that I have read the terms and conditions included with this application for the renewal and agree to comply with the conditions.

A. Sole Proprietor (This section must be completed, signed and dated by the sole proprietor.)

Print Name: Date of Birth: Social Security #:

Residence street address:

City: State: Zip Code:

Telephone # (include area code): Cell Phone # (include area code):

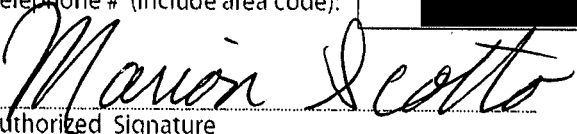
Signature _____ Title _____ Date _____

RETAIL-RENEWAL**B. Partnership** *(This section must be completed, signed and dated by each partner.)*
Attach additional sheets if necessary

Print Name:	<input type="text"/>	Date of Birth:	<input type="text"/>	Social Security #:	<input type="text"/>
Residence street address:	<input type="text"/>				
City:	<input type="text"/>	State:	<input type="text"/>	Zip Code:	<input type="text"/>
Telephone # (include area code):	<input type="text"/>	Cell Phone # (include area code):	<input type="text"/>		
Partner Signature	Title		Date		

Print Name:	<input type="text"/>	Date of Birth:	<input type="text"/>	Social Security #:	<input type="text"/>
Residence street address:	<input type="text"/>				
City:	<input type="text"/>	State:	<input type="text"/>	Zip Code:	<input type="text"/>
Telephone # (include area code):	<input type="text"/>	Cell Phone # (include area code):	<input type="text"/>		
Partner Signature	Title		Date		

C. Corporation, LLC or LLP *(This section must be completed, signed and dated by an authorized officer. This principal should be the primary point of contact.)*

Print Name:	Marion Scotto	Date of Birth:	<input type="text"/>	Social Security #:	<input type="text"/>
Residence street address:	<input type="text"/>				
City:	<input type="text"/>	State:	<input type="text"/>	Zip Code:	<input type="text"/>
Title:	President				
Telephone # (include area code):	<input type="text"/>	Cell Phone # (include area code):	<input type="text"/>		
Authorized Signature	Title		Date		
	President		10/04/2013		

C. - Continued - All remaining Principals on the license must be listed below.
(Attach additional sheets as needed to include all principals)

Print Name:	Elaina Scotto	Date of Birth:		Social Security #:	
Residence street address:					
City:		State:		Zip Code:	
Title:	Vice President				
Telephone # (include area code):			Cell Phone # (include area code):		

Print Name:	Anthony M. Scotto, Jr	Date of Birth:		Social Security #:	
Residence street address:					
City:		State:		Zip Code:	
Title:	Secretary				
Telephone # (include area code):			Cell Phone # (include area code):		

Print Name:	Rosanna Scotto	Date of Birth:		Social Security #:	
Residence street address:					
City:		State:		Zip Code:	
Title:	Stockholder				
Telephone # (include area code):			Cell Phone # (include area code):		

Print Name:		Date of Birth:		Social Security #:	
Residence street address:					
City:		State:		Zip Code:	
Title:					
Telephone # (include area code):			Cell Phone # (include area code):		

RETAIL-RENEWAL**D. Club** *(This section must be completed, signed and dated by the Club Alcoholic Beverage Control (ABC) Officer who has been approved by the State Liquor Authority.)*

Print Name:	<input type="text"/>	Date of Birth:	<input type="text"/>	Social Security #:	<input type="text"/>
Residence street address:	<input type="text"/>				
City:	<input type="text"/>	State:	<input type="text"/>	Zip Code:	<input type="text"/>
Title:	<input type="text"/>				
Telephone # (include area code):	<input type="text"/>	Cell Phone # (include area code):	<input type="text"/>		
Authorized Signature		Title		Date	

BOND IN SUPPORT OF APPLICATION FOR LICENSE OR PERMIT
UNDER THE NEW YORK ALCOHOLIC BEVERAGE CONTROL LAW

Application Number	Bond Number	This bond expires in	Penal Sum of Bond
		2015	\$1,000.00 Plus Costs

KNOW ALL MEN BY THESE PRESENTS, that we

Name of Applicant	Address of Place of Business
Starjem Restaurant Corp. dba Fresco By Scotto	of 34 East 52nd Street, Aka 485 Madison Avenue New York

in the county of Manhattan, State of NEW YORK 10022, as Principal, and

Name of Insurance Company	Address of Office or usual Place of Business
WESTERN SURETY COMPANY	P.O. Box 5077 Sioux Falls, SD 57117-5077

a surety company approved by the Superintendent of Insurance of New York State as to solvency and responsibility and authorized to transact business in New York State, as Surety, are held and firmly bound unto the People of the State of New York in the penal sum set forth above and for the payment of any costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1,000.00) for the payment of which sum or sums, well and truly to be made, we, the said principal and surety, bind ourselves, successors, and assigns, respectively, jointly and severally, firmly by these presents.

WHEREAS, the above bounden principal is making application to the New York State Liquor Authority, for a license or permit under the Alcoholic Beverage Control Law and the said State Liquor Authority, by Part 81 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the Authority), having required the principal to file with it a bond to the People of the State of New York, as provided in said Law aforesaid,

NOW, THEREFORE, the conditions of this obligation are such that if the said license or permit applied for, which expires on the date designated in said license or permit, is granted to the said principal and the principal will not, during the license or permit period, suffer or permit any violation of the provisions of the Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or give cause, as provided in the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the State Liquor Authority), for the cancellation, revocation or suspension of said license or permit or the issuance of an order of warning, and will pay all fines and penalties which shall accrue thereunder, together with all costs taxed or allowed in any action or proceeding brought or instituted for a violation of any of the provisions of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or for cause for the cancellation, revocation or suspension or issuance of an order of warning as provided in the Alcoholic Beverage Control Law or Rules of the Authority, or costs taxed or allowed in any review pursuant to Section 121 of the Alcoholic Beverage Control Law; then this obligation shall be void; otherwise to remain in full force and effect: subject, however, to the following conditions:

1. An action for the breach of any condition of this bond may be maintained without previous conviction or prosecution for the violation of any provision of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by the State Liquor Authority, or for cause as provided by the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the Authority).
2. The aggregate liability of the surety on account of any and all defaults hereunder shall in no event exceed the penal sum of this bond plus costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1,000.00).
3. Upon the payment of any loss arising under this bond, the surety shall be subrogated to the rights and remedies of the obligee against the principal to recover from the principal any amount so paid.
4. Any action brought for the penal sum of this bond shall be commenced within twenty-four months after the expiration of the license or permit period aforementioned, or for costs within one year after final disposition of any action or proceeding. In the event of the institution of any action or proceeding to review the Authority's determination, the period of 24 months shall not commence until the final determination of the proceeding or litigation.
5. This bond shall be effective during the time the aforementioned license or permit shall be in effect and during any extension thereof.
6. A breach of any condition of this bond shall be deemed to have been established by the revocation, cancellation or suspension of the aforesaid license or permit or the issuance of an order of warning by the State Liquor Authority unless such revocation, cancellation, suspension or order of warning shall have been reversed or annulled by a Court of competent jurisdiction.
7. In any action or proceeding to recover on this bond, the principal and the company named herein as Surety waive any defense which may be asserted on the bond, including, but not limited to, an erroneous, improper or defective inscription or omission to insert or apparent alteration of the expiration year and/or amount of the penal sum of the bond and further waive any objection that the bond bears a printed, typewritten or facsimile signature. Any bond filed with the State Liquor Authority shall be admissible in evidence in any court on application of the State Liquor Authority or the People of the State of New York without further proof of due execution thereof by or on behalf of the principal and surety, and shall be conclusively presumed to have been duly executed by and on behalf of the principal and surety. The bond filed with the State Liquor Authority and bearing the printed or facsimile name of the duly issued bond of the surety company and binding on it, its successors and assigns for the amount specified in Part 81 of Subtitle B of Title 9 of the Official Compilation of Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the State Liquor Authority).

IN WITNESS WHEREOF the parties hereto have caused these presents to be signed and sealed this
31 day of October 2013 9 E. 37TH ST., 4TH FLOOR, NEW

Name of issuing agency GLOBAL COVERAGE, INC. Address YORK, NY 10016-2897
Phone # (212)683-2622

Starjem Restaurant Corp. dba Fresco

By Scotto L. S. Principal (Applicant/Licensee)

WESTERN SURETY COMPANY

BY: Maion Scott

BY: Paul T. Brufat L. S. Surety
Paul T. Brufat, Senior Vice President

ROBERT V. FERRARI

ATTORNEY AT LAW

630 THIRD AVENUE, NEW YORK, N.Y. 10017

(212) 972-7040

TELECOPIER (212) 922-1939

E-MAIL: rvf@rvferrari.com

MICHAEL FERRARI

mf@rvferrari.com

August 27, 2013

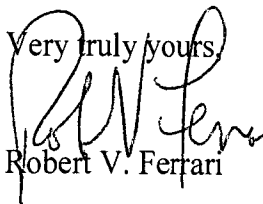
Manhattan Community Board No. 5
450 Seventh Avenue, Suite 2109
New York, New York 10123

Re: Starjem Restaurant Corp
d/b/a Fresco by Scotto
34 East 52nd Street
New York, New York 10022

Dear Sir/Madam,

Enclosed is Renewal Application Notice Form from the State Liquor Authority.

This is being sent pursuant to the Alcoholic Beverage Control Law.

Very truly yours,

Robert V. Ferrari

Enclosure

Via Certified Mail/
Return Receipt Requested

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$.46
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.11



Sent To
MANHATTAN COMMUNITY BOARD NO. 5
 Street, Apt. No.,
 or PO Box No. **450 SEVENTH AVENUE, SUITE 2109**
 City, State, ZIP+4
NEW YORK, NEW YORK 10123

7013 0600 0001 2972 3559

Certified Mail Provides:

- A mailing receipt
- A unique identifier for your mailpiece
- A record of delivery kept by the Postal Service for two years

Important Reminders:

- Certified Mail may ONLY be combined with First-Class Mail® or Priority Mail®.
- Certified Mail is *not* available for any class of international mail.
- NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For valuables, please consider Insured or Registered Mail.
- For an additional fee, a *Return Receipt* may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS® postmark on your Certified Mail receipt is required.
- For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "*Restricted Delivery*".
- If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

IMPORTANT: Save this receipt and present it when making an inquiry.

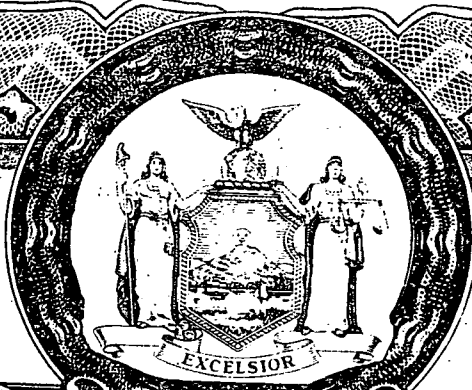
PS Form 3800, August 2006 (Reverse) PSN 7530-02-000-9047

STATE OF NEW YORK
EXECUTIVE DEPARTMENT
DIVISION OF ALCOHOLIC BEVERAGE CONTROL
STATE LIQUOR AUTHORITY

Standardized **NOTICE FORM** for Providing a **30-Day Advance Notice** to a **Local Municipality or Community Board** in connection with the submission to the State Liquor Authority of a (check one)
☐ **New Application** ☒ **Renewal Application** ☐ **Alteration Application**
☐ **Corporate Change** for an On-Premises Alcoholic Beverage License

1.	Date the original copy of this Notice was mailed to the Local Municipality or Community Board:	0	8	2	7	2	0	1	3
THIS 30-DAY ADVANCE NOTICE IS BEING PROVIDED TO THE CLERK OF THE FOLLOWING LOCAL MUNICIPALITY OR COMMUNITY BOARD									
2.	Name of the Local Municipality or Community Board:	Manhattan Community Board No. 5							
ATTORNEY REPRESENTING THE APPLICANT IN CONNECTION WITH THE APPLICANT'S LICENSE APPLICATION NOTED AS ABOVE FOR THE ESTABLISHMENT IDENTIFIED IN THIS NOTICE									
3.	Attorney's Full Name is:	Robert V. Ferrari							
4.	Attorney's Street Address:	630 Third Avenue, 16th Floor							
5.	City, Town or Village:	New York				State: New York		Zip Code: 10017	
6.	Business Telephone Number of Attorney:	(212) 972-7040							
FOR NEW APPLICANTS, PROVIDE DESCRIPTION BELOW USING ALL INFORMATION KNOWN TO DATE FOR ALTERATION APPLICANTS, ATTACH COMPLETE DESCRIPTION AND DIAGRAM OF PROPOSED ALTERATION(S) FOR CURRENT LICENSEES, SET FORTH APPROVED METHOD OF OPERATION ONLY DO NOT USE THIS FORM TO CHANGE YOUR METHOD OF OPERATION									
7.	Type(s) of alcohol sold or to be sold under the license: ("X" One)	<input type="checkbox"/> Beer Only		<input type="checkbox"/> Wine and Beer Only		<input checked="" type="checkbox"/> Liquor, Wine and Beer			
8.	Extent of Food Service: ("X" One)	<input checked="" type="checkbox"/> Restaurant (Sale of food primarily; Full food menu; Kitchen run by chef)		<input type="checkbox"/> Tavern/Cocktail Lounge/Adult Venue/Bar (Alcohol sales primarily-meets legal minimum food availability requirements)					
9.	Type of establishment: ("X" all that apply)	<input checked="" type="checkbox"/> Recorded Music <input type="checkbox"/> Live Music <input type="checkbox"/> Disc Jockey <input type="checkbox"/> Juke Box <input type="checkbox"/> Patron Dancing (Small scale) <input type="checkbox"/> Karaoke Bar <input type="checkbox"/> Cabaret, Night Club, (Large Scale Dance Club) <input type="checkbox"/> Capacity of 600 or more patrons <input type="checkbox"/> Hotel <input type="checkbox"/> Bed & Breakfast <input checked="" type="checkbox"/> Restaurant <input type="checkbox"/> Club (e.g. Golf/Fraternal Org.) <input type="checkbox"/> Catering Facility <input type="checkbox"/> Stage Shows <input type="checkbox"/> Topless Entertainment <input type="checkbox"/> Recreational Facility (Sports Facility/Vessel)							
10.	Licensed outdoor area: ("X" all that apply)	<input type="checkbox"/> None <input type="checkbox"/> Rooftop <input type="checkbox"/> Patio or Deck <input type="checkbox"/> Freestanding Covered Structure <input type="checkbox"/> Garden/Grounds <input checked="" type="checkbox"/> Sidewalk Café <input type="checkbox"/> Other (Specify): None							
11.	Is the premises located within 500' of three or more on-premises liquor establishments?	<input checked="" type="checkbox"/> Yes				<input type="checkbox"/> No			
12.	Will the license holder or a manager be physically present within the establishment during all hours of operation? ("X" one)	<input checked="" type="checkbox"/> Yes				<input type="checkbox"/> No			
13.	License serial number:	1027039				Expiration Date: 10/31/2013			
14.	The applicant's or license holder's full name, as it appears or will appear on the license:	Starjem Restaurant Corp							
15.	The Trade name, if any, under which the establishment conducts or will conduct business:	Fresco by Scotto							
16.	The establishment is located within the building which has the following street address:	34 East 52nd Street a/k/a 485 Madison Avenue							
17.	City, Town, or Village:	New York				NY		Zip Code: 10022	
18.	The establishment is located on the following floor(s) of the building at the above address:	Mezzanine, 1st Floor and Basement							
19.	Within the building at the above address, the establishment is located within the room(s) numbered as follows:	Not applicable							
20.	Business telephone number of applicant/licensee:	(212) 935-3434				Business fax number of applicant/licensee:			
21.	Business e-mail address of applicant/licensee:	marion@frescobyscotto.com							
22.	Does the applicant or license holder own the building in which the establishment is located? ("X" one)	<input type="checkbox"/> Yes (If "Yes", SKIP items 22-25)				<input checked="" type="checkbox"/> No			
OWNER OF THE BUILDING IN WHICH THE LICENSED ESTABLISHMENT IS LOCATED									
23.	Building owner's full name is:	485 Madison Associates							
24.	Building owner's street address:	110 East 59th Street							
25.	City, Town, or Village:	New York				NY		Zip Code: 10022	
26.	Business telephone number of building owner:	2 1 2 - 4 2 1 - 1 3 0 0							
27.	<p>I am the applicant or hold the license or am a principal of the legal entity that holds or is applying for the license. Representations in this form are in conformity with representations made in submitted documents relied upon by the Authority when granting the license. I understand that representations made in this form will also be relied upon, and that false representations may result in disapproval of the application or revocation of the license.</p> <p>By my signature, I affirm - under Penalty of Perjury - that the representations made in this form are true.</p>								
	Printed Name	Marion Scotto				Title		President	
	Signature	x <i>Marion Scotto</i>							

ON-PREMISES LIQUOR LICENSE
SERIAL #: 1027039
COUNTY: NEW YORK



EFFECTIVE DATE: 10/21/2013
EXPIRATION DATE: 10/31/2015
CERTIFICATE #: 830485

NEW YORK STATE LIQUOR AUTHORITY

THE LICENSEE DESIGNATED BELOW IS HEREBY GRANTED PERMISSION, UNDER THE ALCOHOLIC BEVERAGE CONTROL LAW TO TRAFFIC IN ALCOHOLIC BEVERAGE PURSUANT TO THE TYPE OF LICENSE INDICATED IN THE UPPER LEFT HAND CORNER OF THIS CERTIFICATE AND ACCORDING TO THE STATUTES AND REGULATIONS PERTAINING THERETO.

THIS LICENSE SHALL NOT BE TRANSFERABLE TO ANY OTHER PERSON OR TO ANY OTHER PREMISES OR TO ANY OTHER PART OF THE BUILDING CONTAINING SUCH LICENSED PREMISES: IT SHALL NOT BE DEEMED A PROPERTY OR VESTED RIGHT AND MAY BE REVOKED AT ANY TIME PURSUANT TO LAW

METHOD OF OPERATION

RESTAURANT SERVING BEER WINE AND LIQUOR

STARJEM RESTAURANT CORP
FRESCO BY SCOTTO
34 E 52ND STREET
NEW YORK NY 10022

FILING FEE \$90.00
LICENSE FEE \$4,352.00

Dennis Rosen
Chairman

BEFORE COMMENCING OR DOING ANY BUSINESS FOR THE TIME FOR WHICH THIS LICENSE HAS BEEN ISSUED, THE SAID LICENSE SHALL BE ENCLOSED IN A SUITABLE WOOD OR METAL FRAME, HAVING A CLEAR GLASS SPACE AND A SUBSTANTIAL WOOD OR METAL BACK SO THAT THE WHOLE OF SAID LICENSE MAY BE SEEN THEREIN, AND SHALL BE POSTED UP AND AT ALL TIMES DISPLAYED IN A CONSPICUOUS PLACE IN THE ROOM WHERE SUCH BUSINESS IS CARRIED ON, SO THAT ALL PERSONS VISITING SUCH PLACE MAY READILY SEE THE SAME.

SLA FORM 180-033 (10/09)

Certificate No. B830485

FOLD AND TEAR HERE

FOLD AND TEAR HERE

NOA

RECEIVED OCT 05 2015

RENEWAL ADVISORY

Serial #: 1027039

NEW / OP / 252

New Effective Date: 11/01/2015

New Expiration Date: 10/31/2017

License Fee: \$4,352.00

Filing Fee: \$90.00

69 65 07

9/2

TOTAL FEE DUE: \$4,442.00

Premises Address:

STARJEM RESTAURANT CORP

34 E 52ND STREET AKA 485 MADISON AVENUE

NEW YORK, NY 10022

This letter is to notify you that your current license is due to expire on 10/31/2015. The renewal procedures have changed so please review all forms / instructions carefully.

THIS IS THE ONLY NOTIFICATION YOU WILL RECEIVE.

The renewal application form can be found on the Authority's website at www.sla.ny.gov/renewals

You must complete the renewal application and return it with this renewal advisory to the address below:

M&T Bank Lockbox
New York State Liquor Authority
PO Box 8000-Dept 930
Buffalo, New York 14267

You must include this renewal advisory, the completed renewal application, appropriate fee and all other required documents.

The required Community Board notice form for New York City on-premises licensees is also available on our website. You must notify the Community Board at least 30 days prior to sending the renewal forms to the Authority.

NOTE: Renewal applications must be mailed to the address shown above. Applications sent to any other address will be returned and will delay the processing of your renewal.

BOND IN SUPPORT OF APPLICATION FOR LICENSE OR PERMIT
UNDER THE NEW YORK ALCOHOLIC BEVERAGE CONTROL LAW

Application Number	Bond Number	This bond expires in	Penal Sum of Bond
		2017	\$1,000.00 Plus Costs

KNOW ALL MEN BY THESE PRESENTS, that we

Name of Applicant	Address of Place of Business
Starjem Restaurant Corp. dba Fresco By Scotto	34 East 52nd Street, Aka 485 Madison Avenue New York

in the county of Manhattan, State of NEW YORK 10022, as Principal, and

Name of Insurance Company	Address of Office or usual Place of Business
WESTERN SURETY COMPANY	P.O. Box 5077 Sioux Falls, SD 57117-5077

a surety company approved by the Superintendent of Insurance of New York State as to solvency and responsibility and authorized to transact business in New York State, as Surety, are held and firmly bound unto the People of the State of New York in the penal sum set forth above and for the payment of any costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1,000.00) for the payment of which sum or sums, well and truly to be made, we, the said principal and surety, bind ourselves, successors, and assigns, respectively, jointly and severally, firmly by these presents.

WHEREAS, the above bounden principal is making application to the New York State Liquor Authority, for a license or permit under the Alcoholic Beverage Control Law and the said State Liquor Authority, by Part 81 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the Authority), having required the principal to file with it a bond to the People of the State of New York, as provided in said Law aforesaid,

NOW, THEREFORE, the conditions of this obligation are such that if the said license or permit applied for, which expires on the date designated in said license or permit, is granted to the said principal and the principal will not, during the license or permit period, suffer or permit any violation of the provisions of the Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or give cause, as provided in the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the State Liquor Authority), for the cancellation, revocation or suspension of said license or permit or the issuance of an order of warning, and will pay all fines and penalties which shall accrue thereunder, together with all costs taxed or allowed in any action or proceeding brought or instituted for a violation of any of the provisions of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or for cause for the cancellation, revocation or suspension or issuance of an order of warning as provided in the Alcoholic Beverage Control Law or Rules of the Authority, or costs taxed or allowed in any review pursuant to Section 121 of the Alcoholic Beverage Control Law; then this obligation shall be void; otherwise to remain in full force and effect: subject, however, to the following conditions:

1. An action for the breach of any condition of this bond may be maintained without previous conviction or prosecution for the violation of any provision of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by the State Liquor Authority, or for cause as provided by the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the Authority).
2. The aggregate liability of the surety on account of any and all defaults hereunder shall in no event exceed the penal sum of this bond plus costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1,000.00).
3. Upon the payment of any loss arising under this bond, the surety shall be subrogated to the rights and remedies of the obligee against the principal to recover from the principal any amount so paid.
4. Any action brought for the penal sum of this bond shall be commenced within twenty-four months after the expiration of the license or permit period aforementioned, or for costs within one year after final disposition of any action or proceeding. In the event of the institution of any action or proceeding to review the Authority's determination, the period of 24 months shall not commence until the final determination of the proceeding or litigation.
5. This bond shall be effective during the time the aforementioned license or permit shall be in effect and during any extension thereof.
6. A breach of any condition of this bond shall be deemed to have been established by the revocation, cancellation or suspension of the aforesaid license or permit or the issuance of an order of warning by the State Liquor Authority unless such revocation, cancellation, suspension or order of warning shall have been reversed or annulled by a Court of competent jurisdiction.
7. In any action or proceeding to recover on this bond, the principal and the company named herein as Surety waive any defense based upon any defect in the bond, including, but not limited to, an erroneous, improper or defective insertion or omission to insert or apparent alteration of the expiration year and/or amount of the penal sum of the bond and further waive the objection that the bond bears a printed, typewritten or facsimile signature. Any bond filed with the State Liquor Authority shall be admissible in evidence in any court on application of the State Liquor Authority or the People of the State of New York without further proof of due execution thereof by or on behalf of the principal and surety and shall be conclusively presumed to have been duly executed by and on behalf of the principal and surety. The bond filed with the State Liquor Authority and bearing the printed or facsimile name of the state and the typewritten or facsimile signature of its representative shall be conclusively presumed to be the duly issued bond of the surety company and binding on it, its successors and assigns for the amount specified in Part 81 of Subtitle B of Title 9 of the Official Compilation of Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the State Liquor Authority).

IN WITNESS WHEREOF the parties hereto have caused these presents to be signed and sealed this
31 day of October 2015 9 E. 37TH ST., 4TH FLOOR, NEW

Name of issuing agency GLOBAL COVERAGE, INC. Address YORK, NY 10016-2897
Phone # (212)683-2622

Starjem Restaurant Corp. dba Fresco

By Scotto L. S.
Principal (Applicant/Licensee)

WESTERN SURETY COMPANY

BY: Marion Scotto

BY: Paul T. Brufat L. S.
Paul T. Brufat, Senior Vice President

ALL SECTIONS MUST BE COMPLETED IN ORDER TO APPROVE YOUR RENEWAL

1. Licensed Premises InformationIs your licensed premises closed? ☐ YES ☒ NOIf yes, is your license in safekeeping with the Authority? ☐ YES ☐ NOIf yes, do you wish for your license to remain in Safekeeping at Renewal? ☐ YES ☐ NOIf yes to any of the above, submit a statement giving the reason that the license is in Safekeeping and the date that is planned for the premises to re-open. *Please be aware that licenses cannot remain in Safekeeping for an indefinite period of time.*

Licensed Premises Name: Starjem Restaurant Corp.

License Serial #: 1027039

Trade Name (if applicable): Fresco By Scotto

Federal Employer Identification Number: [REDACTED]

1a. Method of Operation: The following questions must be answered by all On-Premises license holders, including beer, beer & wine, or beer, wine & liquor

Section 109 of the ABC Law requires a statement to be submitted indicating the type of establishment operated at the premises.

If you hold an **on-premises** license, please select the method of operation from the following list:

☒ Restaurant ☐ Catering Establishment ☐ Club (i.e., Fraternal Org) ☐ Ball Park/Stadium/Arena ☐ Cabaret ☐ Bed & Breakfast
☐ Bar/Tavern ☐ Adult Entertainment ☐ Night Club/Dance Club ☐ Country Club/ Golf Course ☐ Hotel ☐ Sports Bar

If dancing is permitted at the premises, who is be permitted to dance? ☐ Patrons ☐ Employees ☐ Both ☒ Not ApplicableIf dancing is permitted, is there exotic dancing (i.e.pole dancing, lap dancing, etc.)? ☐ YES ☐ NO ☒ Not ApplicableIs there topless entertainment at the premises? ☐ YES ☒ NO

Please list any condition(s) or stipulation(s) associated with your current license that were agreed to with the local Municipality/ Community Board or placed on your license by the Authority. Attach additional sheets if necessary.

None

1b. Address of the Licensed Premises

Licensed Premises Address: 34 East 52nd Street a/k/a 485 Madison

**Required*

City: New York

State: NY

Zip Code: 10022

County: New York

Email Address:

**Required*

Marion@frescobyscotto.com

Premises Telephone # (include area code):

(212) 935-3434

Contact Phone # (include area code):

(212) 972-7040

**Required*

If the address your premise is know by has changed as a result of a 911 update, provide a copy of the 911 address notification form, a letter from the local municipality, or other proof of the address update.

Mailing Address (if different than premises address)

Mailing Address:

City:

State:

Zip Code:

1c. Landlord/Building Owner Name and Address - also required if building is owned by the licensee

Landlord Name:

Address:

City: State: Zip Code:

2. Arrest/Conviction Information

Has the applicant or (if partnership) any of the partners, or (if a corporation) any of the officers, directors, stockholders, or any agent or employee of the applicant, been **ARRESTED** and/or **CONVICTED** during this renewal period (including pleas of guilty or suspended sentences) of any felony or of any other crime or offense of any kind except minor traffic violations?

☐ YES ☒ NO ☐ Previously Reported

If YES, complete the chart below. Submit a Police Report, Certificate of Disposition, Certificate of Conviction or a Certificate of Relief from Disabilities from the Court Clerk for each case. If the charge(s) are not complete submit documentation showing your next court appearance. If necessary, attach additional sheets.

Name of the Defendant	Connection with Licensed Premise (licensee, officer)	Date of Offense	Nature of the arrest and/or conviction	Disposition

3. Applicant Information and Certification

The signature below certifies that I know the contents of this application and the statements contained therein; that the same are true of my own knowledge; and that I am authorized to execute this application and sign this certification. I further certify that I have read the terms and conditions included with this application for the renewal and agree to comply with the conditions.

A. Sole Proprietor (This section must be completed, signed and dated by the sole proprietor.)

Print Name: Date of Birth: Social Security #:

Residence street address:

City: State: Zip Code:

Telephone # (include area code): Cell Phone # (include area code):

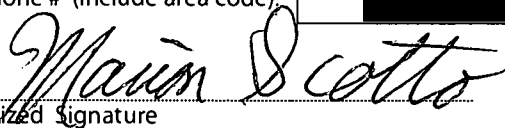
Signature _____ Title _____ Date _____

B. Partnership (This section must be completed, signed and dated by each partner.)**Attach additional sheets if necessary**

Print Name:	<input type="text"/>	Date of Birth:	<input type="text"/>	Social Security #:	<input type="text"/>
Residence street address:	<input type="text"/>				
City:	<input type="text"/>	State:	<input type="text"/>	Zip Code:	<input type="text"/>
Telephone # (include area code):	<input type="text"/>	Cell Phone # (include area code):	<input type="text"/>		
Partner Signature		Title		Date	

Print Name:	<input type="text"/>	Date of Birth:	<input type="text"/>	Social Security #:	<input type="text"/>
Residence street address:	<input type="text"/>				
City:	<input type="text"/>	State:	<input type="text"/>	Zip Code:	<input type="text"/>
Telephone # (include area code):	<input type="text"/>	Cell Phone # (include area code):	<input type="text"/>		
Partner Signature		Title		Date	

C. Corporation, LLC or LLP (This section must be completed, signed and dated by an authorized officer. This principal should be the primary point of contact.)

Print Name:	Marion Scotto	Date of Birth:	<input type="text"/>	Social Security #:	<input type="text"/>
Residence street address:	<input type="text"/>				
City:	<input type="text"/>	State:	<input type="text"/>	Zip Code:	<input type="text"/>
Title:	President				
Telephone # (include area code):	<input type="text"/>	Cell Phone # (include area code):	<input type="text"/>		
Authorized Signature		Title	President	Date	9/22/15

C. - Continued - All remaining Principals on the license must be listed below.**(Attach additional sheets as needed to include all principals)**

Print Name:	Elaina Scotto	Date of Birth:		Social Security #:	
Residence street address:					
City:		State:		Zip Code:	
Title:	Vice President				
Telephone # (include area code):		Cell Phone # (include area code):			

Print Name:	Anthony M. Scotto, Jr	Date of Birth:		Social Security #:	
Residence street address:					
City:		State:		Zip Code:	
Title:	Secretary				
Telephone # (include area code):		Cell Phone # (include area code):			

Print Name:	Rosanna Scotto	Date of Birth:		Social Security #:	
Residence street address:					
City:		State:		Zip Code:	
Title:	Stockholder				
Telephone # (include area code):		Cell Phone # (include area code):			

Print Name:		Date of Birth:		Social Security #:	
Residence street address:					
City:		State:		Zip Code:	
Title:					
Telephone # (include area code):		Cell Phone # (include area code):			

D. Club (This section must be completed, signed and dated by the Club Alcoholic Beverage Control (ABC) Officer who has been approved by the State Liquor Authority.)

Print Name:	<input type="text"/>	Date of Birth:	<input type="text"/>	Social Security #:	<input type="text"/>
Residence street address:	<input type="text"/>				
City:	<input type="text"/>	State:	<input type="text"/>	Zip Code:	<input type="text"/>
Title:	<input type="text"/>				
Telephone # (include area code):	<input type="text"/>		Cell Phone # (include area code):	<input type="text"/>	
Authorized Signature		Title		Date	

7015 1730 0000 1235 1260 0921 SE55 1260

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- ☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage

6.74

\$

Total Postage and Fees

6.74

\$

Sent To

Manhattan Community Board No. 5

Street and Apt. No., or PO Box No.

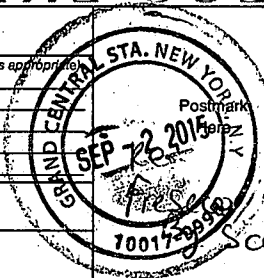
450 Fashion Avenue # 2109

City, State, ZIP+4

New York, NY 10123

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions



Certified Mail service provides the following benefits:

- A receipt (this portion of the Certified Mail label).
- A unique identifier for your mailpiece.
- Electronic verification of delivery or attempted delivery.
- A record of delivery (including the recipient's signature) that is retained by the Postal Service for a specified period.

Important Reminders:

- You may purchase Certified Mail service with First-Class Mail®, First-Class Package Service® or Priority Mail® service.
- Certified Mail service is *not* available for international mail.
- Insurance coverage is *not* available for purchase with Certified Mail service. However, the purchase of Certified Mail service does not change the insurance coverage automatically included with certain Priority Mail items.
- For an additional fee, and with a proper endorsement on the mailpiece, you may request the following services:
 - Return receipt service, which provides a record of delivery (including the recipient's signature).
 - You can request a hardcopy return receipt or an electronic version. For a hardcopy return receipt, complete PS Form 3811, *Domestic Return Receipt*; attach PS Form 3811 to your mailpiece;

for an electronic return receipt, see a retail associate for assistance. To receive a duplicate return receipt for no additional fee, present this USPS®-postmarked Certified Mail receipt to the retail associate.

Restricted delivery service, which provides delivery to the addressee specified by name, or to the addressee's authorized agent.

Adult signature service, which requires the signee to be at least 21 years of age (not available at retail).

Adult signature restricted delivery service, which requires the signee to be at least 21 years of age and provides delivery to the addressee specified by name, or to the addressee's authorized agent (not available at retail).

To ensure that your Certified Mail receipt is accepted as legal proof of mailing, it should bear a USPS postmark. If you would like a postmark on this Certified Mail receipt, please present your Certified Mail item at a Post Office™ for postmarking. If you don't need a postmark on this Certified Mail receipt, detach the barcoded portion of this label, affix it to the mailpiece, apply appropriate postage, and deposit the mailpiece.

IMPORTANT: Save this receipt for your records.

FERRARI & FERRARI LLP

Attorneys at Law

630 THIRD AVENUE, 18TH FLOOR, NEW YORK, N.Y. 10017

(212) 972-7040

TELECOPIER (212) 922-1939

ROBERT V. FERRARI

rvf@rvferrari.com

MICHAEL FERRARI

mf@rvferrari.com

September 2, 2015

Manhattan Community Board No. 5
450 Fashion Avenue, #2109
New York, New York 10123

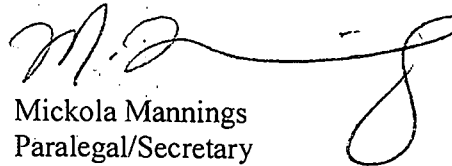
Re: Starjem Restaurant Corp d/b/a Fresco by Scotto
34 East 52nd Street a/k/a 485 Madison Avenue
New York, New York 10022
Serial No. 1027039

Dear Sir/Madam,

Enclosed is the Standardized Notice Form providing 30-Day Advanced Notice to the community board.

This is being sent pursuant to the Alcoholic Beverage Control Law.

Very truly yours,


Mickola Mannings
Paralegal/Secretary

Enclosure

Via Certified Mail/
Return Receipt Requested

State of New York
Executive Department
Division of Alcoholic Beverage Control
State Liquor Authority

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

Standardized NOTICE FORM for Providing 30-Day Advanced Notice to a Local Municipality or Community Board

(Page 1 of 2 of Form)

1. Date Notice was Sent: (mm/dd/yyyy)

2. Select the type of Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License

☐ New Application ☒ Renewal ☐ Alteration ☐ Corporate Change

This 30-Day Advance Notice is Being Provided to the Clerk of the following Local Municipality or Community Board

3. Name of Municipality or Community Board

Applicant/Licensee Information

4. License Serial Number, if not New Application: Expiration Date, if not New Application:

5. Applicant or Licensee Name:

6. Trade Name (if any):

7. Street Address of Establishment:

8. City, Town or Village: ,NY Zip Code:

9. Business Telephone Number of Applicant/Licensee:

10. Business Fax Number of Applicant/Licensee:

11. Business E-mail of Applicant/Licensee:

**For New applicants, provide description below using all information known to date.
For Alteration applicants, attach complete description and diagram of proposed alteration(s).
For Current Licensees, set forth approved Method of Operation only.
Do Not Use This Form to Change Your Method of Operation.**

12. Type(s) of Alcohol sold or to be sold: ("X" One) ☐ Beer Only ☐ Wine & Beer Only ☒ Liquor, Wine & Beer

13. Extent of Food Service: ("X" One) ☒ Restaurant (Sale of food primarily; Full food menu; Kitchen run by chef) ☐ Tavern/Cocktail Lounge/Adult Venue/Bar (Alcohol sales primarily; Meets legal minimum food availability requirements)

14. Type of Establishment: ("X" all that apply)

<input checked="" type="checkbox"/> Recorded Music	<input type="checkbox"/> Live Music	<input type="checkbox"/> Disc Jockey	<input type="checkbox"/> Juke Box	<input type="checkbox"/> Karaoke Bar	<input type="checkbox"/> Stage Shows
<input type="checkbox"/> Patron Dancing (small scale)	<input type="checkbox"/> Cabaret, Night Club (Large Scale Dance Club)		<input type="checkbox"/> Catering Facility		
<input type="checkbox"/> Capacity of 600 or more patrons	<input type="checkbox"/> Topless Entertainment	<input checked="" type="checkbox"/> Restaurant	<input type="checkbox"/> Hotel		
<input type="checkbox"/> Recreational Facility (Sports Facility/Vessel)	<input type="checkbox"/> Club (e.g. Golf Club/Fraternal Org.)	<input type="checkbox"/> Bed & Breakfast			
<input type="checkbox"/> Seasonal Establishment					

15. Licensed Outdoor Area: ("X" all that apply)

<input checked="" type="checkbox"/> None	<input type="checkbox"/> Patio or Deck	<input type="checkbox"/> Rooftop	<input type="checkbox"/> Garden/Grounds	<input type="checkbox"/> Freestanding Covered Structure
<input type="checkbox"/> Sidewalk Cafe <input type="checkbox"/> Other (specify): <input type="text"/>				

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

State of New York
Executive Department
Division of Alcoholic Beverage Control
State Liquor Authority

**Standardized NOTICE FORM for Providing 30-Day Advanced Notice to a
Local Municipality or Community Board**

(Page 2 of 2 of Form)

16. List the floor(s) of the building that the establishment is located on: Mezzanine, First floor, Basement
17. List the room number(s) the establishment is located in within the building, if appropriate: N/A
18. Is the premises located with 500 feet of three or more on-premises liquor establishments? ☒ Yes ☐ No
19. Will the license holder or a manger be physically present within the establishment during all hours of operation? ☒ Yes ☐ No
20. Does the applicant or licensee own the building in which the establishment is located? ("X" One) ☐ Yes (If Yes SKIP 21-24) ☒ No

Owner of the Building in Which the Licensed Establishment is Located

21. Building Owner's Full Name: 485 Madison Associates
22. Building Owner's Street Address: 110 East 59th Street
23. City, Town or Village: New York State: NY Zip Code: 10022

**Attorney Representing the Applicant in Connection with the Applicant's License Application Noted as Above for the
Establishment Identified in this Notice**

25. Attorney's Full Name: Ferrari & Ferrari LLP
26. Attorney's Street Address: 630 Third Avenue, 18th floor
27. City, Town or Village: New York State: NY Zip Code: 10017
28. Business Telephone Number of Attorney: (212) 972-7040
29. Business Email Address of Attorney: (212) 922-1939

I am the applicant or hold the license or am a principal of the legal entity that holds or is applying for the license. Representations in this form are in conformity with representations made in submitted documents relied upon by the Authority when granting the license. I understand that representations made in this form will also be relied upon, and that false representations may result in disapproval of the application or revocation of the license.

By my signature, I affirm - under **Penalty of Perjury** - that the representations made in this form are true.

30. Printed Name: Marion Scotto Title: President
- Signature: X Marion Scotto

FERRARI & FERRARI LLP

Attorneys at Law
630 THIRD AVENUE, 18TH FLOOR, NEW YORK, N.Y. 10017
(212) 972-7040
TELECOPIER (212) 922-1939

ROBERT V. FERRARI
rvf@rvferrari.com
MICHAEL FERRARI
mf@rvferrari.com

®

October 1, 2015

M&T Bank Lockbox
New York State Liquor Authority
P.O. Box 8000- Dept. 930
Buffalo, New York 14267

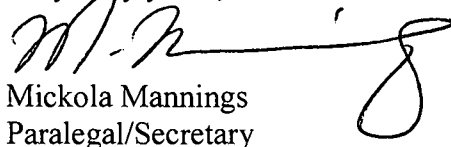
Re: Starjem Restaurant Corp d/b/a Fresco by Scotto
34 East 52nd Street a/k/a 485 Madison Avenue
New York, NY 10022
Serial No. 1027039

Dear Sir/Madam,

Enclosed please find the completed filing application for the renewal of on-premise liquor license.

This is being sent pursuant to the Alcoholic Beverage Control Law.

Very truly yours,


Mickola Mannings
Paralegal/Secretary



OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

STATE OF NEW YORK
NOTICE OF APPEARANCE

1027039

Section 166 of the Executive Law requires a regulatory agency to maintain for public inspection, a record of who appears before it, for a fee as a third party (i.e., an attorney, an agent, lobbyist*, or representative) on behalf of a person or organization subject to the regulatory jurisdiction of the agency. This usually occurs when the third party's client is involved in an enforcement, formal permit, or application matter. *This form is subject to all the rules and regulations of the Freedom of Information Law. Information that is confidential as a matter of law need not be furnished.*

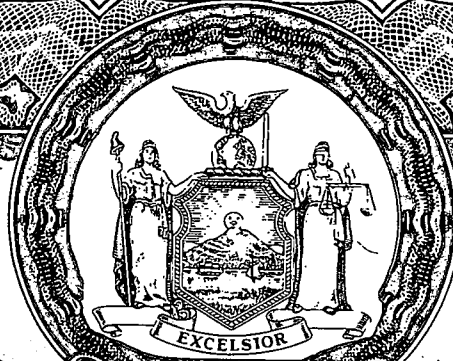
Agency: NYS State Liquor Authority**Date:** 10/01/2015**Division/Bureau:** Renewals**1. Name of individual appearing:** Michael Ferrari**Address:** 630 Third Avenue, 18th Floor, New York, NY 10017**Telephone:** (212) 972-7040**Email:** mf@rvferrari.com**2. Client represented:** Starjem Restaurant Corp d/b/a Fresco by Scotto**Address:** 34 East 52nd Street a/k/a 485 Madison Avenue, New York, NY 10022**Telephone:** (212) 935-3434**3. Subject of appearance:** ☒ **Regulatory/Enforcement** ☐ **Lobbying**

Completed renewal application for filing.

4. Acting in capacity of:☒ **Attorney** ☐ **Lobbyist** ☐ **Agent**☐ **Other (describe)** _____**5. Are you being compensated?** ☒ **Yes** ☐ **No****If YES, Check FEE or SALARY** ☒ **FEE** ☐ **SALARY****6. Signature of individual appearing:**Michael Ferrari**7. Agency official (print name):**[Signature]**Signature:** _____

*A LOBBYIST is a person or organization, other than a New York State government employee acting in an official capacity, who appears for the purpose of influencing the adoption or rejection of proposed rules, regulations, rates, legislation, including the State budget or the specification or award of a State Procurement Contract. An "appearance" for lobbying purposes can be a personal visit, letter, telephone call, conversation at a meeting, or any other type of contact, but does not include "on the record" proceedings or hearings.

ON-PREMISES LIQUOR LICENSE
SERIAL #: 1027039
COUNTY: NEW YORK



EFFECTIVE DATE: 10/08/2015
EXPIRATION DATE: 10/31/2017
CERTIFICATE #: 854619

NEW YORK STATE LIQUOR AUTHORITY

THE LICENSEE DESIGNATED BELOW IS HEREBY GRANTED PERMISSION, UNDER THE ALCOHOLIC BEVERAGE CONTROL LAW TO TRAFFIC IN ALCOHOLIC BEVERAGE PURSUANT TO THE TYPE OF LICENSE INDICATED IN THE UPPER LEFT HAND CORNER OF THIS CERTIFICATE AND ACCORDING TO THE STATUTES AND REGULATIONS PERTAINING THERETO.

THIS LICENSE SHALL NOT BE TRANSFERABLE TO ANY OTHER PERSON OR TO ANY OTHER PREMISES OR TO ANY OTHER PART OF THE BUILDING CONTAINING SUCH LICENSED PREMISES: IT SHALL NOT BE DEEMED A PROPERTY OR VESTED RIGHT AND MAY BE REVOKED AT ANY TIME PURSUANT TO LAW.

METHOD OF OPERATION

RESTAURANT SERVING BEER WINE AND LIQUOR

STARJEM RESTAURANT CORP
FRESCO BY SCOTTO
34 E 52ND STREET
NEW YORK NY 10022

FILING FEE \$90.00
LICENSE FEE \$4,352.00

Vincent G. Bradley
Chairman

BEFORE COMMENCING OR DOING ANY BUSINESS FOR THE TIME FOR WHICH THIS LICENSE HAS BEEN ISSUED, THE SAID LICENSE SHALL BE ENCLOSED IN A SUITABLE WOOD OR METAL FRAME, HAVING A CLEAR GLASS SPACE AND A SUBSTANTIAL WOOD OR METAL BACK SO THAT THE WHOLE OF SAID LICENSE MAY BE SEEN THEREIN, AND SHALL BE POSTED UP AND AT ALL TIMES DISPLAYED IN A CONSPICUOUS PLACE IN THE ROOM WHERE SUCH BUSINESS IS CARRIED ON, SO THAT ALL PERSONS VISITING SUCH PLACE MAY READILY SEE THE SAME.

SLA FORM 180-033 (10/09)

Certificate No. B854619

FOLD AND TEAR HERE

FOLD AND TEAR HERE

**NEW YORK STATE LIQUOR AUTHORITY
RENEWAL ADVISORY**

RECEIVED OCT 05 2017

Serial #: 1027039

Key: 171NEWOP0006650252

License fee: 4,352.00
Filing fee: 90.00
Total fee due: 4,442.00

New effective date: 11/01/2017
New expiration date: 10/31/2019

Premises Address:

STARJEM RESTAURANT CORP
FRESCO BY SCOTTO
34 E 52ND STREET AKA 485 MADISON AVENUE
NEW YORK, NY 10022

01/31/17

*This letter is to notify you that your current license/permit is due to expire on 10/31/2017.
The renewal procedures have changed so please review all forms / instructions carefully.*

THIS IS THE ONLY NOTIFICATION YOU WILL RECEIVE.

*The renewal application form can be found on the Authority's website at
www.sla.ny.gov/renewals*

You must complete the renewal application and return it with this renewal advisory to the address below:

**M&T Bank Lockbox
New York State Liquor Authority
PO Box 8000-Dept 930
Buffalo, New York 14267**

NOTE: Renewal applications must be mailed to the address shown above. Applications sent to any other address will be returned and will delay the processing of your renewal.

You must include this renewal advisory, the completed renewal application, appropriate fee and all other required documents.

All on-premises applicants located within the five (5) boroughs of New York City (whether beer; beer & wine; or beer, wine & liquor) are required to notify the local Community Board at least 30 days prior to filing their renewal application with the NYS Liquor Authority (per Section 110(b) of the ABC Law).

THE STANDARDIZED COMMUNITY BOARD/MUNICIPALITY NOTICE AND PROOF OF DELIVERY MUST BE SUBMITTED WITH THIS APPLICATION.

Bond Form L-9 Prescribed by the
New York State Liquor Authority
June 3, 1974

BOND IN SUPPORT OF APPLICATION FOR LICENSE OR PERMIT
UNDER THE NEW YORK ALCOHOLIC BEVERAGE CONTROL LAW

Application Number	Bond Number	This bond expires in	Penal Sum of Bond
		2019	\$1,000.00 Plus Costs

KNOW ALL MEN BY THESE PRESENTS, that we

Name of Applicant	Address of Place of Business
Starjem Restaurant Corp. dba Fresco By Scotto	34 East 52nd Street, Aka 485 Madison Avenue New York

in the county of Manhattan, State of NEW YORK 10022, as Principal, and

Name of Insurance Company	Address of Office or usual Place of Business
WESTERN SURETY COMPANY	P.O. Box 5077 Sioux Falls, SD 57117-5077

e surety company approved by the Superintendent of Insurance of New York State as to solvency and responsibility and authorized to transact business in New York State, as Surety, are held and firmly bound unto the People of the State of New York in the penal sum set forth above and for the payment of any costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1,000.00) for the payment of which sum or sums, well and truly to be made, we, the said principal and surety, bind ourselves, successors, and assigns, respectively, jointly and severally, firmly by these presents.

WHEREAS, the above bounden principal is making application to the New York State Liquor Authority, for a license or permit under the Alcoholic Beverage Control Law and the said State Liquor Authority, by Part 81 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the Authority), having required the principal to file with it a bond to the People of the State of New York, as provided in said Law aforesaid,

NOW, THEREFORE, the conditions of this obligation are such that if the said license or permit applied for, which expires on the date designated in said license or permit, is granted to the said principal and the principal will not, during the license or permit period, suffer or permit any violation of the provisions of the Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or give cause, as provided in the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the State Liquor Authority), for the cancellation, revocation or suspension of said license or permit or the issuance of an order of warning, and will pay all fines and penalties which shall accrue thereunder, together with all costs taxed or allowed in any action or proceeding brought or instituted for a violation of any of the provisions of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by said State Liquor Authority, or for cause for the cancellation, revocation or suspension or issuance of an order of warning as provided in the Alcoholic Beverage Control Law or Rules of the Authority, or costs taxed or allowed in any review pursuant to Section 121 of the Alcoholic Beverage Control Law; then this obligation shall be void; otherwise to remain in full force and effect: subject, however, to the following conditions:

1. An action for the breach of any condition of this bond may be maintained without previous conviction or prosecution for the violation of any provision of said Alcoholic Beverage Control Law, or of any of the rules now or hereafter issued by the State Liquor Authority, or for cause as provided by the Alcoholic Beverage Control Law or Part 53 of Subtitle B of Title 9 of the Official Compilation of the Codes, Rules and Regulations of the State of New York (Rule 36 of the Rules of the Authority).
2. The aggregate liability of the surety on account of any and all defaults hereunder shall in no event exceed the penal sum of this bond plus costs taxed or allowed in any action or proceeding to the extent of One Thousand Dollars (\$1,000.00).
3. Upon the payment of any loss arising under this bond, the surety shall be subrogated to the rights and remedies of the obligee against the principal to recover from the principal any amount so paid.
4. Any action brought for the penal sum of this bond shall be commenced within twenty-four months after the expiration of the license or permit period aforementioned, or for costs within one year after final disposition of any action or proceeding. In the event of the institution of any action or proceeding to review the Authority's determination, the period of 24 months shall not commence until the final determination of the proceeding or litigation.
5. This bond shall be effective during the time the aforementioned license or permit shall be in effect and during any extension thereof.
6. A breach of any condition of this bond shall be deemed to have been established by the revocation, cancellation or suspension of the aforesaid license or permit or the issuance of an order of warning by the State Liquor Authority unless such revocation, cancellation, suspension or order of warning shall have been reversed or annulled by a Court of competent jurisdiction.
7. In any action or proceeding to recover on this bond, the principal and the company named herein as Surety waive any objection to any defect in the bond, including, but not limited to, an erroneous, improper or defective inscription, omission, insert or apparent alteration of the expiration year and/or amount of the penal sum of the bond and further waive any objection that the bond bears a printed, typewritten or facsimile signature. Any bond filed with the State Liquor Authority shall be admissible in evidence in any court on application of the State Liquor Authority or the People of the State of New York without further proof of due execution thereof by or on behalf of the principal and surety, and shall be conclusively presumed to have been duly executed by and on behalf of the principal and surety. The bond filed with the State Liquor Authority and bearing the printed or facsimile name of the principal and surety, and the printed or facsimile signature of its representative shall be conclusively presumed to be the duly issued bond of the surety company and binding on it, its successors and assigns for the amount specified in Part 81 of Subtitle B of Title 9 of the Official Compilation of Codes, Rules and Regulations of the State of New York (Rule 9 of the Rules of the State Liquor Authority).

IN WITNESS WHEREOF the parties hereto have caused these presents to be signed and sealed this
31 day of October 2017 at 9 E. 37TH ST., 4TH FLOOR, NEW

Name of issuing agency GLOBAL COVERAGE, INC. Address YORK, NY 10016-2897
Phone # (212)683-2622

Starjem Restaurant Corp. dba Fresco
By Scotto L. S. WESTERN SURETY COMPANY

Principal (Applicant/Licensee) Surety
BY: Marion Scotto BY: Paul T. Bruflat L. S.
Paul T. Bruflat, Vice President

ALL SECTIONS MUST BE COMPLETED IN ORDER TO APPROVE YOUR RENEWAL

1. Licensed Premises InformationIs your licensed premises closed? ☐ YES ☒ NOIf yes, is your license in safekeeping with the Authority? ☐ YES ☐ NOIf yes, do you wish for your license to remain in Safekeeping at Renewal? ☐ YES ☐ NO

If yes to any of the above, submit a statement giving the reason that the license is in Safekeeping and the date that is planned for the premises to re-open. Please be aware that licenses cannot remain in Safekeeping for an indefinite period of time.

Licensed Premises Name: Starjem Restaurant Corp

License Serial #: 1027039

Trade Name (if applicable): Fresco By Scotto

Federal Employer Identification Number : [REDACTED]

1a. Method of Operation: The following questions must be answered by all On-Premises license holders, including beer, beer & wine, or beer, wine & liquor

Section 109 of the ABC Law requires a statement to be submitted indicating the type of establishment operated at the premises.

If you hold an **on-premises** license, please select the method of operation from the following list:☒ Restaurant ☐ Catering Establishment ☐ Club (i.e., Fraternal Org) ☐ Ball Park/Stadium/Arena ☐ Cabaret ☐ Bed & Breakfast☐ Bar/Tavern ☐ Adult Entertainment ☐ Night Club/Dance Club ☐ Country Club/ Golf Course ☐ Hotel ☐ Sports BarIf dancing is permitted at the premises, who is be permitted to dance? ☐ Patrons ☐ Employees ☐ Both ☒ Not ApplicableIf dancing is permitted, is there exotic dancing (i.e.pole dancing, lap dancing, etc.)? ☐ YES ☐ NO ☒ Not ApplicableIs there topless entertainment at the premises? ☐ YES ☒ NO

Please list any condition(s) or stipulation(s) associated with your current license that were agreed to with the local Municipality/ Community Board or placed on your license by the Authority. Attach additional sheets if necessary.

None

1b. Address of the Licensed Premises

Licensed Premises Address: 34 East 52nd Street a/k/a 485 Madison

**Required*

City: New York

State: NY

Zip Code: 10022

County: New York

Email Address:

marion@frescobyscotto.com

**Required*

Premises Telephone # (include area code):

(212) 935-3434

Contact Phone # (include area code):

(212) 972-7040

**Required*

If the address your premise is know by has changed as a result of a 911 update, provide a copy of the 911 address notification form, a letter from the local municipality, or other proof of the address update.

Mailing Address (if different than premises address)

Mailing Address:

City:

State:

Zip Code:

1c. Landlord/Building Owner Name and Address - also required if building is owned by the licensee

Landlord Name: 485 Madison Associates

Address: 110 East 59th Street

City: New York

State: NY

Zip Code: 10022

2. Arrest/Conviction Information

Has the applicant or (if partnership) any of the partners, or (if a corporation) any of the officers, directors, stockholders, or any agent or employee of the applicant, been **ARRESTED** and/or **CONVICTED** during this renewal period (including pleas of guilty or suspended sentences) of any felony or of any other crime or offense of any kind except minor traffic violations?

☐ YES ☒ NO ☐ Previously Reported

If YES, complete the chart below. Submit a Police Report, Certificate of Disposition, Certificate of Conviction or a Certificate of Relief from Disabilities from the Court Clerk for each case. If the charge(s) are not complete submit documentation showing your next court appearance. If necessary, attach additional sheets.

Name of the Defendant	Connection with Licensed Premise (licensee, officer)	Date of Offense	Nature of the arrest and/or conviction	Disposition

3. Applicant Information and Certification

The signature below certifies that I know the contents of this application and the statements contained therein; that the same are true of my own knowledge; and that I am authorized to execute this application and sign this certification. I further certify that I have read the terms and conditions included with this application for the renewal and agree to comply with the conditions.

A. Sole Proprietor (This section must be completed, signed and dated by the sole proprietor.)

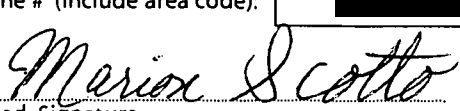
Print Name:		Date of Birth:		Social Security #:	
Residence street address:					
City:		State:		Zip Code:	
Telephone # (include area code):			Cell Phone # (include area code):		
Signature		Title		Date	

B. Partnership (This section must be completed, signed and dated by each partner.)
Attach additional sheets if necessary

Print Name:	<input type="text"/>	Date of Birth:	<input type="text"/>	Social Security #:	<input type="text"/>
Residence street address:	<input type="text"/>				
City:	<input type="text"/>	State:	<input type="text"/>	Zip Code:	<input type="text"/>
Telephone # (include area code):	<input type="text"/>	Cell Phone # (include area code):	<input type="text"/>		
Partner Signature		Title		Date	

Print Name:	<input type="text"/>	Date of Birth:	<input type="text"/>	Social Security #:	<input type="text"/>
Residence street address:	<input type="text"/>				
City:	<input type="text"/>	State:	<input type="text"/>	Zip Code:	<input type="text"/>
Telephone # (include area code):	<input type="text"/>	Cell Phone # (include area code):	<input type="text"/>		
Partner Signature		Title		Date	

C. Corporation, LLC or LLP (This section must be completed, signed and dated by an authorized officer.)
This principal should be the primary point of contact.)

Print Name:	Marion Scotto	Date of Birth:	<input type="text"/>	Social Security #:	<input type="text"/>
Residence street address:	<input type="text"/>				
City:	<input type="text"/>	State:	<input type="text"/>	Zip Code:	<input type="text"/>
Title:	<input type="text"/>				
Telephone # (include area code):	<input type="text"/>	Cell Phone # (include area code):	<input type="text"/>		
Authorized Signature		Title	President	Date	9/29/17

C. - Continued - All remaining Principals on the license must be listed below.
(Attach additional sheets as needed to include all principals)

Print Name:	Elaina Scotto	Date of Birth:		Social Security #:	
Residence street address:					
City:		State:		Zip Code:	
Title:	Vice President				
Telephone # (include area code):		Cell Phone # (include area code):			

Print Name:	Anthony M. Scotto, Jr.	Date of Birth:		Social Security #:	
Residence street address:					
City:		State:		Zip Code:	
Title:	Stockholder / see				
Telephone # (include area code):		Cell Phone # (include area code):			

Print Name:	Rosanna Scotto	Date of Birth:		Social Security #:	
Residence street address:					
City:		State:		Zip Code:	
Title:	Stockholder				
Telephone # (include area code):		Cell Phone # (include area code):			

Print Name:		Date of Birth:		Social Security #:	
Residence street address:					
City:		State:		Zip Code:	
Title:					
Telephone # (include area code):		Cell Phone # (include area code):			

D. Club *(This section must be completed, signed and dated by the Club Alcoholic Beverage Control (ABC) Officer who has been approved by the State Liquor Authority.)*

Print Name:	<input type="text"/>	Date of Birth:	<input type="text"/>	Social Security #:	<input type="text"/>
Residence street address:	<input type="text"/>				
City:	<input type="text"/>	State:	<input type="text"/>	Zip Code:	<input type="text"/>
Title:	<input type="text"/>				
Telephone # (include area code):	<input type="text"/>		Cell Phone # (include area code):	<input type="text"/>	
Authorized Signature		Title		Date	

FERRARI & FERRARI LLP

Attorneys at Law
630 Third Avenue, 18th floor, New York, N.Y. 10017
(212) 972-7040
TELECOPIER (212) 922-1939

ROBERT V. FERRARI
rvf@rvferrari.com
MICHAEL FERRARI
mf@rvferrari.com

August 30, 2017

Manhattan Community Board No. 5
450 Fashion Avenue, #2109
New York, New York 10123

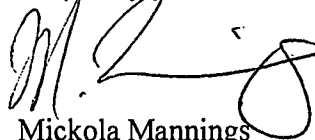
Re: Starjem Restaurant Corp d/b/a Fresco by Scotto
34 East 52nd Street a/k/a 485 Madison Avenue
New York, New York 10022
Serial No. 1027039

Dear Sir/Madam,

Enclosed is the Standardized Notice Form providing 30-Day Advanced Notice to the community board.

This is being sent pursuant to the Alcoholic Beverage Control Law.

Very truly yours,



Mickola Mannings
Paralegal/Secretary

Enclosure

Via Certified Mail/
Return Receipt Requested

7016 3010 0000 2468 3973.

U.S. Postal ServiceTM
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®

OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- | | | |
|--|----|--|
| <input type="checkbox"/> Return Receipt (hardcopy) | \$ | |
| <input type="checkbox"/> Return Receipt (electronic) | \$ | |
| <input type="checkbox"/> Certified Mail Restricted Delivery | \$ | |
| <input type="checkbox"/> Adult Signature Required | \$ | |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ | |

Postage

\$

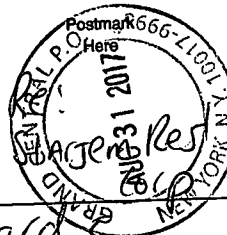
Total Postage and Fees

\$

6.74

Send To

Manhattan Community Board
Street and Apt. No., or PO Box No. 450 Madison Avenue #2109
City, State, ZIP+4 NY, NY 10123



Certified Mail service provides the following benefits:

- A receipt (this portion of the Certified Mail label).
- A unique identifier for your mailpiece.
- Electronic verification of delivery or attempted delivery.
- A record of delivery (including the recipient's signature) that is retained by the Postal Service™ for a specified period.

Important Reminders:

- You may purchase Certified Mail service with First-Class Mail®, First-Class Package Service®, or Priority Mail® service.
- Certified Mail service is *not* available for international mail.
- Insurance coverage is *not* available for purchase with Certified Mail service. However, the purchase of Certified Mail service does not change the insurance coverage automatically included with certain Priority Mail items.
- For an additional fee, and with a proper endorsement on the mailpiece, you may request the following services:
 - Return receipt service, which provides a record of delivery (including the recipient's signature). You can request a hardcopy return receipt or an electronic version. For a hardcopy return receipt, complete PS Form 3811, *Domestic Return Receipt*; attach PS Form 3811 to your mailpiece;

for an electronic return receipt; see a retail associate for assistance. To receive a duplicate return receipt for no additional fee, present this USPS®-postmarked Certified Mail receipt to the retail associate.

- Restricted delivery service, which provides delivery to the addressee specified by name, or to the addressee's authorized agent.
- Adult signature service, which requires the signee to be at least 21 years of age (not available at retail).
- Adult signature restricted delivery service, which requires the signee to be at least 21 years of age and provides delivery to the addressee specified by name, or to the addressee's authorized agent (not available at retail).
- To ensure that your Certified Mail receipt is accepted as legal proof of mailing, it should bear a USPS postmark. If you would like a postmark on this Certified Mail receipt, please present your Certified Mail item at a Post Office™ for postmarking. If you don't need a postmark on this Certified Mail receipt, detach the barcoded portion of this label, affix it to the mailpiece, apply appropriate postage, and deposit the mailpiece.

IMPORTANT: Save this receipt for your records.


**State Liquor
Authority**

OFFICE USE ONLY
☐ Original ☐ Amended Date _____

**Standardized NOTICE FORM for Providing 30-Day Advanced Notice to a
Local Municipality or Community Board**

(Page 1 of 2)

1. Date Notice Was Sent: 9/22/2017 1a. Delivered by: Certified Mail Return Receipt Requested

2. Select the type of Application that will be filed with the Authority for an On-Premises Alcoholic Beverage License

☐ New Application ☒ Renewal ☐ Alteration ☐ Corporate Change ☐ Removal ☐ Class Change

For **New** applicants, answer each question below using all information known to date.

For **Renewal** applicants, set forth your approved Method of Operation only.

For **Alteration** applicants, attach a complete written description and diagrams depicting the proposed alteration(s).

For **Corporate Change** applicants, attach a list of the current and proposed corporate principals.

For **Removal** applicants, attach a statement of your current and proposed addresses with the reason(s) for the relocation.

For **Class Change** applicants, attach a statement detailing your current license type and your proposed license type.

This 30-Day Advance Notice is Being Provided to the Clerk of the following Local Municipality or Community Board

3. Name of Municipality or Community Board: Manhattan Community Board No. 5

Applicant/Licensee Information

4. License Serial Number, if Applicable: 1077039 Expiration Date, if Applicable: 10/31/2017

5. Applicant or Licensee Name: Starjem Restaurant Corp

6. Trade Name (if any): Fresco by Scotto

7. Street Address of Establishment: 34 East 52nd Street a/k/a 485 Madison Avenue

8. City, Town or Village: New York, NY Zip Code: 10022

9. Business Telephone Number of Applicant/Licensee: (212) 935-3434

10. Business Fax Number of Applicant/Licensee:

11. Business E-mail of Applicant/Licensee: marion@frescobyscotto.com

12. Type(s) of Alcohol sold or to be sold: ☐ Beer & Cider ☐ Wine, Beer & Cider ☒ Liquor, Wine, Beer & Cider

13. Extent of Food Service: ☒ Full food menu; Full Kitchen run by a chef or cook ☐ Menu meets legal minimum food availability requirements; Food prep area at minimum

14. Type of Establishment: Restaurant

15. Method of Operation: (Check all that apply)
☐ Seasonal Establishment ☐ Juke Box ☐ Disc Jockey ☒ Recorded Music ☐ Karaoke
☐ Live Music (Give details: i.e. rock bands, acoustic, jazz, etc.):
☐ Patron Dancing ☐ Employee Dancing ☐ Exotic Dancing ☐ Topless Entertainment
☐ Video/Arcade Games ☐ Third Party Promoters ☐ Security Personnel
☐ Other (specify):

16. Licensed Outdoor Area: (Check all that apply)
☒ None ☐ Patio or Deck ☐ Rooftop ☐ Garden/Grounds ☐ Freestanding Covered Structure
☐ Sidewalk Cafe ☐ Other (specify):

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____



State Liquor
Authority

**Standardized NOTICE FORM for Providing 30-Day Advanced Notice to a
Local Municipality or Community Board**

(Page 2 of 2)

17. List the floor(s) of the building that the establishment is located on: Mezzanine, First Floor and Basement
18. List the room number(s) the establishment is located in within the building, if appropriate: N/A
19. Is the premises located within 500 feet of three or more on-premises liquor establishments? ☒ Yes ☐ No
20. Will the license holder or a manager be physically present within the establishment during all hours of operation? ☒ Yes ☐ No
21. If this is a transfer application (an existing licensed business is being purchased) provide the name and serial number of the licensee.

22. Does the applicant or licensee own the building in which the establishment is located? ☐ Yes (If Yes SKIP 23-26) ☒ No

Owner of the Building In Which the Licensed Establishment is Located

23. Building Owner's Full Name: 485 Madison Associates
24. Building Owner's Street Address: 110 East 59th Street
25. City, Town or Village: New York State: NY Zip Code: 10022
26. Business Telephone Number of Building Owner: _____

**Representative or Attorney representing the Applicant in Connection with the
application for a license to traffic in alcohol at the establishment identified in this notice**

27. Representative/Attorney's Full Name: Ferrari & Ferrari LLP/Michael Ferrari
28. Street Address: 630 Third Avenue, 18th Floor
29. City, Town or Village: New York State: NY Zip Code: 10017
30. Business Telephone Number of Representative/Attorney: (212) 972-7040
31. Business Email Address: mf@rvferrari.com

I am the applicant or hold the license or am a principal of the legal entity that holds or is applying for the license. Representations in this form are in conformity with representations made in submitted documents relied upon by the Authority when granting the license. I understand that representations made in this form will also be relied upon, and that false representations may result in disapproval of the application or revocation of the license.

By my signature, I affirm - under **Penalty of Perjury** - that the representations made in this form are true.

32. Printed Name: Marion Scotto Title: President

Signature: X Marion Scotto



OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

STATE OF NEW YORK
NOTICE OF APPEARANCE

Section 166 of the Executive Law requires a regulatory agency to maintain for public inspection, a record of who appears before it, for a fee as a third party (i.e., an attorney, an agent, lobbyist*, or representative) on behalf of a person or organization subject to the regulatory jurisdiction of the agency. This usually occurs when the third party's client is involved in an enforcement, formal permit, or application matter. *This form is subject to all the rules and regulations of the Freedom of Information Law. Information that is confidential as a matter of law need not be furnished.*

Agency: NYS Liquor Authority**Date:** 10/3/2017**Division/Bureau:** Renewal**1. Name of individual appearing:** Michael Ferrari**Address:** 630 Third Avenue, 18th Floor, New York, NY 10017**Telephone:** (212) 972-7040**Email:** mf@rvferrari.com**2. Client represented:** Starjem Restaurant Corp d/b/a Fresco By Scotto**Address:** 34 East 52nd Street a/k/a 485 Madison Avenue, New York, NY 10022**Telephone:** (212) 935-3434**3. Subject of appearance:** ☐ Regulatory/Enforcement ☐ Lobbying

Completed renewal application for Starjem Restaurant Corp for filing.

4. Acting in capacity of:☒ Attorney ☐ Lobbyist ☐ Agent☐ Other (describe) _____**5. Are you being compensated?** ☒ Yes ☐ NoIf YES, Check FEE or SALARY ☒ FEE ☐ SALARY**6. Signature of individual appearing:**Michael Ferrari**7. Agency official (print name):** _____**Signature:** _____

*A LOBBYIST is a person or organization, other than a New York State government employee acting in an official capacity, who appears for the purpose of influencing the adoption or rejection of proposed rules, regulations, rates, legislation, including the State budget or the specification or award of a State Procurement Contract. An "appearance" for lobbying purposes can be a personal visit, letter, telephone call, conversation at a meeting, or any other type of contact, but does not include "on the record" proceedings or hearings.

FERRARI & FERRARI LLP

Attorneys at Law
630 Third Avenue, 18th floor, New York, N.Y. 10017
(212) 972-7040
TELECOPIER (212) 922-1939

ROBERT V. FERRARI
rvf@rvferrari.com
MICHAEL FERRARI
mf@rvferrari.com

October 3, 2017

M&T Bank Lockbox
New York State Liquor Authority
P.O. Box 8000- Dept. 930
Buffalo, New York 14267

Re: Starjem Restaurant Corp d/b/a Fresco by Scotto
34 East 52nd Street a/k/a 485 Madison Avenue
New York, NY 10022
Serial No. 1027039

Dear Sir/Madam,

Enclosed please find the completed filing application for the renewal of an on-premise liquor license.

This is being sent pursuant to the Alcoholic Beverage Control Law.

Very truly yours, 

Mickola Mannings
Paralegal

ON-PREMISES LIQUOR LICENSE
SERIAL #: 1027039
COUNTY: NEW YORK



EFFECTIVE DATE: 10/12/2017
EXPIRATION DATE: 10/31/2019
CERTIFICATE #: 882765

NEW YORK STATE LIQUOR AUTHORITY

THE LICENSEE DESIGNATED BELOW IS HEREBY GRANTED PERMISSION, UNDER THE ALCOHOLIC BEVERAGE CONTROL LAW TO TRAFFIC IN ALCOHOLIC BEVERAGE PURSUANT TO THE TYPE OF LICENSE INDICATED IN THE UPPER LEFT HAND CORNER OF THIS CERTIFICATE AND ACCORDING TO THE STATUTES AND REGULATIONS PERTAINING THERETO.

THIS LICENSE SHALL NOT BE TRANSFERABLE TO ANY OTHER PERSON OR TO ANY OTHER PREMISES OR TO ANY OTHER PART OF THE BUILDING CONTAINING SUCH LICENSED PREMISES: IT SHALL NOT BE DEEMED A PROPERTY OR VESTED RIGHT AND MAY BE REVOKED AT ANY TIME PURSUANT TO LAW

METHOD OF OPERATION

RESTAURANT SERVING BEER CIDER WINE AND LIQUOR

STARJEM RESTAURANT CORP
FRESCO BY SCOTTO
34 E 52ND STREET
NEW YORK NY 10022

FILING FEE \$90.00
LICENSE FEE \$4,352.00

Vincent G. Bradley
Chairman

BEFORE COMMENCING OR DOING ANY BUSINESS FOR THE TIME FOR WHICH THIS LICENSE HAS BEEN ISSUED, THE SAID LICENSE SHALL BE ENCLOSED IN A SUITABLE WOOD OR METAL FRAME, HAVING A CLEAR GLASS SPACE AND A SUBSTANTIAL WOOD OR METAL BACK SO THAT THE WHOLE OF SAID LICENSE MAY BE SEEN THEREIN, AND SHALL BE POSTED UP AND AT ALL TIMES DISPLAYED IN A CONSPICUOUS PLACE IN THE ROOM WHERE SUCH BUSINESS IS CARRIED ON, SO THAT ALL PERSONS VISITING SUCH PLACE MAY READILY SEE THE SAME.

SLA FORM 180-033 (10/09)

Certificate No. B0882765

FOLD AND TEAR HERE

FOLD AND TEAR HERE